

The Long Journey Home IX
Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs:
Fiscal Year 2000 Service Delivery and Performance

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Executive Summary

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) health care system. Starting October 1, 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs). The implementation of the VA reorganization and the budget stresses during the ensuing years have stimulated a major review of VA mental health care programs at the VAMC, VISN, and national levels. The shift of the locus of service from costly inpatient programs to more accessible outpatient and community-based clinics is a national VHA goal and continues as a major focus of activity. In the past five years the spectrum of programs for the treatment of PTSD in VA has substantially widened to include a rich array of outpatient clinics, short-term hospital programs, and non-hospital residential rehabilitation programs, gradually replacing the once widely established Specialized Inpatient PTSD Units (SIPUs). Evaluation studies have shown that long-term inpatient treatment of PTSD is not more effective than shorter term hospital treatment with outpatient follow-up care, and is considerably more costly (Fontana and Rosenheck, 1997a). These findings have stimulated significant reallocation of resources for PTSD treatment.

This summary of data on VA treatment programs for PTSD is a component of the National VA Mental Health Program Performance Monitoring System (Rosenheck and DiLella, 2000), and has been prepared to assist clinicians, administrators and planners in their review of programmatic options for treating PTSD. Information is presented in four sections: (1) A national overview and performance assessment of PTSD Treatment in VA including utilization data on both specialized and non-specialized programs; (2) A review of patients treated and services delivered by the Specialized Outpatient PTSD Programs; (3) A review of changes in VA's programmatic capacity to provide treatment for PTSD, and (4) Outcomes monitoring of specialized intensive PTSD programs.

In this report we present information on:

- (1) the population of veterans residing in each VISN, including the number and percent who are service connected or low income (27.5% of all US veterans), the total number who receive VA compensation for PTSD (143,116), and the proportion who use VA mental health services annually (9.0% of all eligible veterans; 60.3% of all those service connected for PTSD);
- (2) the distribution of specialized PTSD programs, and their funding, across VISNs (there are 140 specialized programs nationwide, ranging from 3-13 per VISN);
- (3) population coverage and workload of specialized *outpatient* PTSD programs (53,192 veterans were seen in FY 2000, a 5.4% increase over FY 1999, and 40,957 veterans were treated (seen more than once) in FY 2000, a 7.2% increase over FY 1999);

- (4) workload and cost data on treatment provided by specialized *outpatient* PTSD programs (there were 539,976 visits in FY 2000, a 6.3% increase over FY 1999; the average cost per visit was \$73 and the average cost per capita was \$958);
- (5) population coverage and utilization of *inpatient* treatment for PTSD (VA Census data show 255 occupied general psychiatry *beds* are used to treat veterans with a primary diagnosis of PTSD, a 14.1% decline from FY 1999, constituting 6.2% of all general psychiatry beds. Discharge data show a total of 8271 *episodes* of inpatient treatment for PTSD in FY 2000, compared to 9186 in FY 1999, a 10% decrease);
- (6) workload and cost data on treatment provided by *specialized* inpatient and residential PTSD programs (there were 5106 admissions in FY 2000 at an average cost of \$4662 per admission and \$136 per day);
- (7) a summary PTSD performance score which evaluates each VISN on its delivery of both inpatient and outpatient PTSD services;
- (8) the characteristics of patients treated in VA's specialized outpatient PTSD programs;
- (9) changes in PTSD program workload, staffing and costs during the past two years, and
- (10) outcomes of PTSD treatment in specialized intensive programs.

For ease of reference, Appendix B presents the goals for the Special Emphasis Programs for PTSD as introduced in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*, and as modified subsequently with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters.

PTSD is one of the most prevalent of war-related illnesses. Providing high quality treatment for PTSD will remain a top priority for VA as it builds on the clinical experience and expertise it has developed during the past decade. The data presented here suggest considerable variability across VISNs in the delivery of some PTSD services. It is the task of thoughtful planning, performance assessment, and clinical care to assure that, as VA passes through a period of major change during the years to come, the treatment provided to veterans with PTSD is equitably distributed, accessible, effective and, efficient.

Acknowledgements

Laurent Lehmann MD, Chief Consultant of the Strategic Health Group for Mental Health, has provided vision and support for our national monitoring efforts of VA's PTSD programs. At NEPEC the PTSD Evaluations staff, Karen Arena, Denise Bocek and Pam DeLuca were involved in many aspects of data collection and report preparation. Bernice Zigler, Alexandra Ackles, Jennifer Cahill, Donald Showalter and Dennis Thompson, Director of the Office of Information Systems provided the data management support that made the report possible. Virginia Emond, Michael Reed, Patty Crann, Linda Scelfo-Appio, and Carol DeFaranos provided essential administrative support for the completion of this project, and have assured its dissemination across the VA system.

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Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) health care system. With both clinical recognition and clear scientific demonstration that the effects of war zone trauma can be long lasting and severe (Wilson & Raphael, 1994; Kulka et al., 1990), VA has increasingly directed substantial clinical, educational, and research resources towards treatment of the only psychiatric illness directly related to war-zone experience.

For many thousands of veterans, PTSD is a chronic disorder resulting directly from their military service that causes substantial psychological suffering and social disability. The national network of specialized PTSD programs that has been established by VA is unique in the world. Studies have shown that veterans are very well pleased with the services received, significantly more so than they are with services from nonspecialized psychiatry programs (Fontana & Rosenheck, 1996a). The availability of specialized PTSD programs is an important indicator of the quality of health care provided by VA. At the close of FY 2000, VA's specialized outpatient programs for PTSD consisted of 98 clinical teams: 87 PTSD Clinical Teams (PCTs), 7 Substance Use PTSD Teams (SUPTs) and 4 Women's Stress Disorder Treatment Teams (WSDTTs). At the close of FY 2000, VA's specialized intensive programs for PTSD consisted of 5 Evaluation and Brief Treatment Units (EBTPUs), 18 PTSD Residential Rehabilitation Programs (PRRPs), 9 PTSD Day Hospitals, 1 PTSD/Substance Abuse Unit (PSU), 7 Specialized Inpatient PTSD Units (SIPUs), 1 PSU/SIPU, 1 dual-diagnosis PTSD Day Hospital with a substance abuse component (DHsa), and 1 Women's Trauma Recovery Program (WTRP). The central mission of these teams as defined by Headquarters and the VA Special Committee on PTSD is to provide specialized PTSD treatment services to underserved veterans with PTSD due to military-related trauma.

Since 1988, the Northeast Program Evaluation Center, which also serves as the Evaluation Division of the National Center for PTSD, has been monitoring and evaluating the implementation and performance of specialized VA programs for the treatment of war-zone related PTSD under the auspices of VA's Strategic Health Care Group for Mental Health (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995; Fontana & Rosenheck, 1994, 1996a; Rosenheck & Fontana, 1994a, 1994b, 1996).

Reorganization of the Veterans Health Administration (VHA)

About five years ago, in October 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs) (Kizer, 1995). The 22 VISNs are charged with developing cost-effective health care programs that are responsive to both the national mission of the Department of Veterans Affairs and to local circumstances and trends in health care service delivery. The implementation of the VA reorganization, and the anticipation of possible budget reductions during the coming years, has stimulated a major review of VA health care programs (mental health programs among them) at the VAMC, VISN, and national levels. The shift of the locus of

service from costly inpatient programs to more accessible outpatient and community-based clinics has been identified as a national corporate goal and is emerging as a major goal of planning at the VISN level.

Organizational change is invariably a complex and difficult process. Clear, accurate and relevant data are essential to the success of such a process. In this summary report we have assembled a variety of types of information on the operation of VA's PTSD treatment programs to aid clinicians and administrators at various stages of planning for the future of VA treatment of PTSD.¹

Structure, Process and Outcome in the Evaluation of Health Care Service Delivery

For the past 20 years, the evaluation of health care systems has been conceptualized as assessing three dimensions of care: (1) structure, the resources needed to provide care, (2) process, the delivery of services, and (3) outcome, the impact of treatment on the well-being of patients (Donabedian, 1988). The data presented in sections I - III of this report primarily focus on structure and process of treatment and on population-based rates of service utilization. Outcome has been addressed extensively in previous and ongoing studies conducted at NEPEC, and in Part IV of this report. The first of these studies addressed the performance of VA's PTSD Clinical Teams in considerable breadth and depth (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995; Fontana & Rosenheck, 1996a). Evaluation data showed that the programs were serving their intended target population and that treatment was associated with significant improvement in PTSD symptoms and other life domains. Further, a major study of the cost and effectiveness of different approaches to inpatient PTSD treatment has been published (Fontana & Rosenheck, 1996a, 1997a; Rosenheck & Fontana, 1995b). In addition, a comprehensive outcome monitoring system has been implemented for inpatient PTSD treatment at 62 VA medical centers (Fontana & Rosenheck, 1997b), and additional outcome data are presented in Part IV of this report.

A recent discussion of health care performance assessment in cardiac surgery in VA, however, has refocused attention away from the "tyranny of outcomes" (Berwick, 1988) by drawing attention to the fact that outcomes can only be influenced by changes in clinical process and clinical structures (Hammermeister et al., 1995). There is thus substantial need for basic information on the structure and process of PTSD treatment, in addition to data on outcome performance. Issues of basic structure and program design are especially important since they have the greatest impact on total service costs. With anticipated reductions in Medicare and Medicaid funding and the growth of the number of Americans without health care coverage continuing at a rate of 1 million persons per year, VA will become the provider of last resort for an increasing number of veterans. This is especially true in the mental health area, in which major reductions in funding for State Mental Health Agencies have been under way for several

¹ This report is part of a larger effort to provide VA managers with data on performance in the mental health area and is part of a more general National Mental Health Program Performance Monitoring system that addresses the core aspects of VA mental health care, including both specialized and non-specialized programs (Rosenheck & DiLella, 2000).

years. It will thus be important to maximize the efficiency of service delivery if VA is to expand its treatment capacity to help the growing number of eligible veterans for whom it is the provider of last resort.

A recent national survey of veterans examined why veterans chose to use VA services and found that while 19.4% of VA system users reported low cost as the main reason, the second largest proportion (18.4%) chose VA because it "provided services not found elsewhere" (US Department of Veterans Affairs, 1995, p. 53). Several other studies have found that veterans with war zone service (Rosenheck & Massari, 1993) and, more specifically, Vietnam veterans with PTSD (Rosenheck & Fontana, 1995a) are significantly more likely to use VA rather than non-VA mental health services. VA services for PTSD are thus likely to be in high demand during the coming years and major efforts are needed to assure that services are available to the greatest extent possible.

PART I: AN OVERVIEW OF VA TREATMENT OF PTSD

Population Characteristics

Table 1 presents basic information on the population of veterans in each VISN, on the number who are eligible for VA services, the number and proportion who are service connected for a psychiatric disorder, and who are specifically service connected for PTSD. While there are substantial differences in the total veteran population in each VISN, differences in the proportions who are eligible for VA services or who are service connected are small to moderate. More detailed data on sociodemographic characteristics of veterans in each VISN are available in the report on the full mental health monitoring system (Rosenheck & DiLella, 2000).

Additional data on use of *VA mental health services* among all veterans and, more specifically, among those service-connected for PTSD are also presented in Table 1. Here too variations in population coverage between VISNs are modest, as evidenced by the small coefficients of variation (the standard deviation of the mean of all VISNs divided by the mean of all VISNs). Outlier values are defined as those that are 1 standard deviation below the mean of all VISNs, reflecting especially low population coverage, and are indicated by being framed in Table 1.²

Specialized Treatment Programs for PTSD in VA

The initial task for system planners is to identify the location and distribution of existing programs. VA programs that treat patients with PTSD can be divided into two types: general psychiatry programs and "specialized programs." General programs are standard VA inpatient and outpatient programs that treat veterans with PTSD in the same settings in which they treat veterans with other mental health problems. The "specialized programs" are staffed by experts who have concentrated their clinical work in the area of PTSD treatment. Such specialization has long been recognized as an essential feature in treatment of war-related PTSD. Treatment of PTSD requires specific familiarity with the kinds of trauma veterans encountered in various US wars, and special skills and experience to address the effects of these traumas.

Tables 2-3 present summary information on the number and types of specialized PTSD programs in each VISN and at each medical center. VISNs with especially small numbers of specialized programs are framed in Table 2. Table 2a shows changes from FY 1999- FY 2000 in the number of programs operating in each VISN. There was a net gain of 2 PCTs and 1 EBTPU, and a net loss of 1 PRRP, 1 PTSD Day Hospital program and 1 specialized intensive PTSD program with a substance abuse component. Additional data on changes in program staffing are presented in Part III of this report.

²One standard deviation is used as the criterion for identifying outliers throughout Part I. Since most comparisons reported here are one-tailed, one standard deviation identifies the extreme 15% of each distribution.

Tables 4-5 present data on FY 2000 expenditures by VISN and by each of these programs. Fiscal data presented in Tables 4 and 5 reflect expenditure of special Congressionally appropriated funds along with locally generated funds for PTSD treatment as reported by each medical center in its annual program summary to NEPEC. These data are combined in Table 4 with population data to evaluate population-based per capita spending on specialized PTSD treatment in each VISN. While these funds account for the great majority of expenditures on specialized PTSD outpatient programs, they often constitute only part of the funding of inpatient programs. Bolding/underlining is used to indicate VISNs that spend especially high proportions of special funds on inpatient care. Framed values reflect low per capita levels of funding.

In past reports, Table 6 presented data from VA's Cost Distribution report (CDR) on all VA expenditures for inpatient PTSD programs (including both locally allocated funds and funds allocated by a peer review process from special Congressionally appropriated funds). Separate cost centers for these programs were initiated in FY 1994 and many sites have not fully used these cost centers in their CDR distributions. As a result, substantial discrepancies have been observed in some instances between total funding as reported on the CDR, and total funding, as reported in annual program reports to NEPEC. These data were presented in Long Journey Home in the past, in part, to stimulate more careful reporting of expenditures in the proper cost accounts in the CDR. Unfortunately, incongruities between the CDR reports and the annual program reports continue to exist and reliable data for FY 2000 were not available. For this reason, Table 6 is not included in this year's report.

Specialized PTSD Outpatient Programs

Tables 7 through 8 present summary workload data on the work of specialized PTSD outpatient clinics: the PTSD Clinical Teams (PCT) program, the Substance Use PTSD Teams (SUPT) program, and the Women's Stress Disorder Treatment Teams (WSDTT) program. Table 7 presents basic information from computerized VA workload data (the outpatient file) on the number of veterans treated, the number of visits received, and the number of visits per veteran for PCTs and SUPTs in each VISN. Data are also presented (Table 7a) on workload changes from FY 1999 to FY 2000. Overall these programs saw 5.4% more patients in FY 2000 than in FY 1999, and the intensity of contact increased as evidenced by an increase of 6.3% in number of visits.

Tables 7b. and 7c. present the number of unique veterans by VISN and nationally for fiscal years 1996 - 2000. Table 7b. presents data on the number of unique veterans seen and the number of veterans treated (seen more than once), and Table 7c. presents data on the number of unique new (not seen in the preceding fiscal year) veterans seen and treated. Last year we corrected the numbers of veterans seen and treated at the VISN level and nationally to eliminate duplicate counts of veterans seen by multiple programs. This year and in future years we will present these data at the VISN level and nationally with all workload eliminated from facilities which do not have specialized outpatient PTSD programs. Tables in this and later chapters of this report that present outpatient workload data by VISN and at the national level will display only unduplicated numbers of veterans from facilities with specialized programs.

Table 8 presents workload data for specialized PTSD programs by medical center within each VISN. Teams that saw especially low numbers of veterans in FY 2000, or that deliver low intensity services, are framed.

Inpatient and Residential Treatment of PTSD

As noted above, inpatient treatment of PTSD in VA takes place in both specialized programs for PTSD and general psychiatry programs. National VA workload data do not allow differentiation of treatment in different types of PTSD programs, although new bed section codes, introduced in FY 1994, will allow such differentiation in the future. In this section we first present data on inpatient and residential PTSD treatment overall, without differentiating various types of specialized programs. Data on specialized programs are presented subsequently.

Census Data. Tables 9 and 10 present data from the FY 2000 end-of-year national census of VA inpatients (conducted on patients hospitalized at midnight on September 30). Table 9 presents data on the number of occupied general psychiatry beds³ in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). This year data are also presented on the number of occupied domiciliary and PRRP beds in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). Data are also presented on the length of stay for these patients *up to the time of the census*.⁴ Since these are one-day cross-sectional data it should be borne in mind that they weight data from long-stay patients more heavily than data averaging care delivered during the entire year (e.g., the data presented in Tables 11, 11-2, 12, and 12-2). VISNs with especially long lengths of stay for PTSD (1 standard deviation above the mean of all VISNs) are signaled by bolding/underlining. Table 9 also presents population data on beds per capita among eligible veterans in the general population. VISNs with especially high numbers of beds per capita occupied by PTSD patients are bolded/underlined, while VISNs with especially low numbers of PTSD beds per capita are framed. While the advantage of census data is that they present information on occupied beds, the representativeness of a one-day sample is limited. Additional information is available, however, from the discharge abstract file -- the Patient Treatment File (PTF). Table 9a presents data on changes from FY 1999- FY 2000 in beds devoted to PTSD treatment. There was a 6.7% decline in the total number of general psychiatry beds in VA; an 8.0% decline in the proportion of general psychiatry beds used for PTSD treatment; and a 2.0% decline in length of stay. There was an 11.0% decrease in the total number of domiciliary and PRRP beds in VA; an 11.9% increase in the proportion of domiciliary and PRRP beds used for PTSD treatment; and a 0.7% decline in length of stay.

Discharge Abstract Data. Tables 11, 11-2, 12, and 12-2 present data on all completed episodes of inpatient, domiciliary, and PRRP treatment in FY 2000. Data are presented on the

³ Bed section codes 70-71, 75-79, 89 and 91-93. Domiciliary, PRRP and Hoptel care are not included.

⁴ These data are truncated at 365 days to reflect care delivered during FY 2000 only.

total number of discharges for all diagnoses, and average length of stay⁵. Data are also presented on the unique (unduplicated) veterans treated and their cumulative bed days of care during the year. The next two columns present the proportion of all episodes of care and the proportion of all unique veterans who received inpatient treatment for PTSD. VISNs treating especially low proportions of PTSD patients are indicated by framed values. The next series of columns present data on average length of stay, and cumulative days per veteran per year for PTSD treatment. VISNs with long stays and high bed days of care for inpatient utilization are marked by bolding/underlining.

The next pair of columns presents data on the *ratio* of average length of stay and cumulative bed days of care for PTSD to average length of stay and cumulative bed days of care for all general psychiatry patients. These ratios reflect systematic differences in patterns of inpatient care for PTSD as compared to inpatient care for all psychiatric disorders. High values are marked by bolding/underlining. Finally, Table 11-2 presents data on the number of episodes of PTSD treatment per Category A veteran in the general population, for each VISN. Equivalent data are presented by VAMC in Tables 12 and 12-2 (although population-based treatment estimates are not available for individual medical centers).

Tables 11a and 11b present data on the change from, FY 1999 to FY 2000, in the number and percent of patients receiving treatment for PTSD in general psychiatry inpatient beds and PRRP and domiciliary beds. VA provided a total of 8,271 episodes of inpatient treatment for PTSD in FY 2000 compared to 9,186 in FY 1999, a 10.0% decrease. Average length of stay declined slightly from 13.9 in FY 1999 to 13.4 in FY 2000, a 3.6% reduction. A total of 3,823 episodes of domiciliary and PRRP treatment for PTSD was provided in FY 2000 compared to 3,966 in FY 1999, a 3.6% decrease. Average length of stay declined from 50.9 in FY 1999 to 50.2 in FY 2000, a 1.3% reduction.

Specialized Inpatient PTSD Programs

Tables 2 and 3 presented data on the distribution of four different types of inpatient PTSD programs in VA; Specialized Inpatient PTSD Units (SIPUs); PTSD Substance Abuse Units (PSUs); PTSD Residential Rehabilitation Programs (PRRPs) and Evaluation and Brief Treatment PTSD Units (EBTPUs). In this section we present additional information on these specialized programs from annual program summaries submitted to NEPEC.

As with Table 6, Table 13 is not being presented this fiscal year. Table 13 contained data on the number of operating beds and the number of admissions to specialized programs, based on data from annual report submissions to NEPEC. Additional data were presented from the CDR report of the current fiscal year. As noted with Table 6, many medical centers have not yet fully implemented procedures for accurately distributing costs to specific PTSD programs on the CDR. Because this is the case, reliable data were unavailable for FY 2000 and Table 13 is not

⁵ These measures are also truncated at 365 days, as are the cumulative bed days of care, described below. Very few PTSD patients have such long lengths of stay minimizing censoring problems in these data.

included in this report.

Performance Data on PTSD Treatment in VA

Tables 14-20 present performance assessment data on VA treatment of PTSD, by VISN and by VAMC. These data address both inpatient and outpatient care provided to an unduplicated sample of *all* veterans discharged from general psychiatry inpatient units (which include the specialized inpatient PTSD units) with a primary diagnosis of PTSD between October 1, 1999 and March 31, 2000.⁶ The monitors focus on service use and outcomes during the six months after the initial discharge. These measures are based on those used to evaluate performance in all VA mental health programs and are described more fully in VA's National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 2000).

Inpatient Performance. Tables 14 and 15 present data on inpatient care, by VISN and by VAMC, that include:

- (1) the number of unduplicated veterans discharged with a diagnosis of PTSD,
- (2) the average length of stay of the index episode,
- (3) bed days of psychiatric care during the six months after discharge,
- (4) the change in bed days of psychiatric care from the six months before discharge to the six months after discharge,
- (5) the number of additional psychiatric hospital discharges during the six months after the index discharge,
- (6) readmission rates to general psychiatry bed sections at 14 days, 30 days and 180 days, after discharge, and
- (7) the number of days to first readmission among those readmitted to psychiatry bed sections.

Outlier performance is defined, for descriptive purposes, as any value that is 1 standard deviation from the mean of all VISNs (and all VAMCs, where indicated). Such outliers are identified in Tables 14 and 15 by framed values. A summary inpatient performance score for each VISN is derived by averaging the standard scores across all measures (see last column of Table 14).⁷

⁶ These data thus differ from those presented above in that they are based on a more intensively studied sample, which includes only veterans discharged during the first half of the fiscal year, about half of the unique veterans whose care was addressed in Tables 11-12.

⁷ These standard scores are z-scores, the site mean less the average of all site means divided by the standard deviation of all site means. Some measures are weighted more heavily in these averages than others, based on their importance and independence of other measures. Measures that address common factors (such as the readmission rates at 14, 30 and 180 days) are combined to form one measure in the overall average. For a full explanation of methods used for combining performance

Outpatient Performance. Tables 16 and 17 present data on outpatient care among discharged veterans, by VISN and by VAMC, that include:

- (1) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 6 months following discharge,
- (2) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 30 days following discharge,
- (3) the number of days from discharge to the first general psychiatric visit during the six months after the index discharge, among those with at least one such visit,
- (4) the number of general psychiatric visits received by veterans who received at least one visit during the 6 months following discharge,
- (5) continuity of care, as measured by the number of two month periods (during the first six months after discharge) in which the veteran received two or more general psychiatry outpatient visits,
- (6) the proportion of veterans with a secondary diagnosis of alcohol or drug abuse in addition to their primary diagnosis of PTSD,
- (7) receipt of any substance abuse services during the six months following discharge,
- (8) the ratio of the proportion of veterans who received substance abuse treatment to the proportion who were dually diagnosed, and
- (9) the number of substance abuse outpatient services received during those six months among those who received any outpatient substance abuse services.⁸

Outlier performances are defined, as above, as a mean performance that is 1 standard deviation from the mean of all VISNs or all VAMCs and are identified in Tables 16 and 17 by framed values. As above, a summary outpatient performance score is derived by averaging the standard scores across all pertinent measures and is presented in the last column of Table 16 (see note 8, for details).

Outpatient Continuity of Care. Tables 16A-16B and Tables 17A-17B present a series of monitors that address continuity of care provided to outpatients with PTSD within the outpatient

measures see Rosenheck & DiLella, 1998.

⁸ General psychiatry outpatient visits (which include visits to specialized PTSD outpatient programs) are defined by outpatient file stop codes 501-506; 509-510; 515-516, 520-521, 525, 529, 531, 540-541; 550-554, 557-558; 561-563; 573-578; and 580-581. Substance abuse outpatient visits are defined by stop codes 507-508; 513-514; 517-519; 522-523; 555-556, 560.

treatment setting. Thus, in contrast to the conventional HEDIS measures that evaluate the timeliness of entry into outpatient treatment following discharge from the hospital, these measures address continuity of care among patients with PTSD during the six months following their first outpatient visit in each fiscal year. These address the number of visits, the distribution of those visits across time, and the number of different providers involved. It is assumed that seriously mentally ill patients are best served by having regular contacts with the same provider over an extended period of time.

Continuity of care is widely regarded as a crucial ingredient in the treatment of patients with severe mental illness (Bachrach, 1981). A recent review of the literature on continuity of care for people with severe mental illness identified two broad components of continuity of care for such patients: (1) a cross sectional component involving adequate communication between providers and access to a comprehensive array of needed services; and (2) a longitudinal component involving continuous contact over time, constancy of service providers, continuity through discharges and transfers and implementation of service plans (Johnson S. et al., 1997). We have developed a series of measures that specifically address several aspects of the longitudinal component of continuity of care.

The sample examined for this monitor includes all veterans who had at least two visits in a specialty outpatient clinic (500 series DSS identifier) in which the primary diagnosis was PTSD (ICD 9 code 309.81). Data were then compiled from the encounter forms on all mental health specialty visits and all unique providers seen by the veteran during the 6 months following the first contact of the year. These data were used to construct indicators that reflect: (1) the number of outpatient visits, (2) the number of different days on which the veteran had an outpatient visit; (3) the number of two-month periods in which the veteran had 2 or more visits (range 0-3); (4) the number of months in which the veteran had one mental health visit; and (5) whether the veteran concluded treatment, defined operationally as having no specialty mental health visits for 6 months. In addition two composite indices of continuity of care based on both the number of visits and the number of providers were constructed. The first of these measures, (6) the Continuity of Care (COC) index is based in the following formula developed by Bice and Boxerman (1977):

$$COC = \frac{\sum_{j=1}^s n_j^2 - n}{n(n-1)}$$

where n equals the total number of visits and n_j is the total visits to the j^{th} provider.

This measure generates a continuity of care score from 0-1, with one representing more visits with fewer providers and zero represents few visits with each of several providers.

The second index (7) is the Modified Modified Continuity Index (MMCI) developed by Magill and

Senf (1987):

$$MMCI = \frac{1 - (n \text{ of providers} / [n \text{ of visits} + 0.1])}{1 - (1 / [n \text{ of visits} + 0.1])}$$

This index takes a somewhat different approach to calculating a measure based on a 0-1 scale in which one represents more visits with fewer providers and zero represents few visits with numerous providers. After risk adjustment for patient demographic and diagnostic characteristics, standardized scores of these seven measures are averaged to represent an overall index of continuity of care among seriously mentally ill VA outpatients receiving services from specialty mental health clinics.

Overall PTSD Performance Score

An overall PTSD performance score is presented in Table 18. This score averages the two summary outpatient scores (for which desirable performance is in the positive direction) from Table 16 and Table 16A, with the negative of the inpatient score presented in Table 14. The sign of the inpatient score is reversed because the direction of desirable performance on the inpatient summary score presented in Table 14 is in the negative direction. Positive scores on the overall inpatient and outpatient PTSD performance score thus reflect high outpatient service provision/outcome and low inpatient service provision/outcome while negative scores reflect the opposite -- high levels of inpatient utilization/outcome and readmission, and low outpatient service delivery -- a pattern which runs counter to VA corporate goals (Kizer, 1995).

Out-of-VISN Treatment

As a result of their specialized focus, PTSD programs sometimes treat patients who reside in other VISNs. Tables 19 and 20 present data on the proportion of veterans who received treatment for PTSD, but reside outside of the VISN in which they were treated. For comparison, data are also presented on the proportion of such "in-VISN" veterans among those who were discharged from general psychiatry units but whose primary diagnosis was not PTSD, and among those who were discharged from substance abuse units. These data have not changed substantially since FY 1999.

Table 1. Veteran Population Characteristics and Use of VA Services (from 1990 Census and VA Workload and C&P Files, FY 2000).

VISN	Total Vet Population (SC/Low Inc)		Percent SC/ Low Inc#	Total Vets SC for Psych.	Percent SC/ Psych#	SC PTSD	Percent SC/PTSD#	Used VA MH Svces.		PCT Used VA MH Svces.*	
								All Vets	SC PTSD	Of SC/ Low Income	Of SC PTSD
1	1,500,892	358,094	23.9%	31,311	2.1%	9,001	0.60%	36,647	5,621	10.2%	62.4%
2	697,421	194,415	27.9%	12,081	1.7%	3,865	0.55%	17,933	2,296	9.2%	59.4%
3	1,595,593	335,211	21.0%	27,997	1.8%	7,135	0.45%	30,055	4,245	9.0%	59.5%
4	1,819,870	497,402	27.3%	27,100	1.5%	8,080	0.44%	36,574	4,994	7.4%	61.8%
5	857,564	168,218	19.6%	9,848	1.1%	2,853	0.33%	17,212	1,756	10.2%	61.5%
6	1,251,189	360,885	28.8%	22,227	1.8%	6,778	0.54%	30,572	4,065	8.5%	60.0%
7	1,367,528	399,439	29.2%	25,540	1.9%	8,842	0.65%	37,713	5,565	9.4%	62.9%
8	1,634,357	482,839	29.5%	43,180	2.6%	8,518	0.52%	60,292	5,494	12.5%	64.5%
9	1,060,416	367,654	34.7%	21,374	2.0%	6,750	0.64%	31,021	4,451	8.4%	65.9%
10	1,151,473	318,983	27.7%	16,220	1.4%	4,023	0.35%	30,467	2,306	9.6%	57.3%
11	1,651,186	427,356	25.9%	18,180	1.1%	3,902	0.24%	28,173	2,323	6.6%	59.5%
12	1,362,314	319,235	23.4%	14,929	1.1%	4,024	0.30%	26,594	2,384	8.3%	59.2%
13	707,005	210,110	29.7%	11,253	1.6%	3,450	0.49%	17,428	2,182	8.3%	63.2%
14	516,075	153,798	29.8%	6,586	1.3%	2,029	0.39%	10,338	1,107	6.7%	54.6%
15	1,071,604	329,293	30.7%	15,639	1.5%	5,261	0.49%	29,017	3,300	8.8%	62.7%
16	1,887,301	651,983	34.5%	39,858	2.1%	14,405	0.76%	60,051	8,815	9.2%	61.2%
17	1,026,699	321,378	31.3%	18,016	1.8%	6,024	0.59%	27,057	3,749	8.4%	62.2%
18	842,132	276,151	32.8%	16,249	1.9%	6,069	0.72%	27,193	3,693	9.8%	60.9%
19	731,842	215,445	29.4%	12,128	1.7%	5,055	0.69%	19,775	2,924	9.2%	57.8%
20	1,191,422	342,926	28.8%	22,559	1.9%	11,550	0.97%	34,014	6,267	9.9%	54.3%
21	1,418,772	338,504	23.9%	20,029	1.4%	8,970	0.63%	30,493	5,057	9.0%	56.4%
22	1,841,007	418,847	22.8%	20,586	1.1%	6,532	0.35%	38,900	3,675	9.3%	56.3%
ALL VA	27,183,662	7,488,166	27.5%	452,890	1.7%	143,116	0.53%	677,519	86,269	9.0%	60.3%
AVERAGE	1,235,621	340,371	27.8%	20,586	1.7%	6,505	0.53%	30,796	3,921	9.0%	60.2%
SD	397,725	113,743	4.0%	8,983	0.4%	2,904	0.17%	11,758	1,754	1.2%	3.0%
CV	0.32	0.33	0.14	0.44	0.23	0.45	0.32	0.38	0.45	0.14	0.05

* Outlined values are 1 s.d. below the mean of all VISNs and highlight VISNs with low population coverage.

Percentages based on total veteran population living in the VISN.

Table 2. SPECIALIZED PTSD PROGRAMS, BY VISN: FY 2000

VISN	PCT	SUPT	WSDTT	SIPU	PSU	PRRP	EBTPU	DH	WTRP	OTHER	SUM VISN*
1	6	2	1	1	0	1	0	2	0	0	13
2	2	0	0	0	0	1	0	0	0	0	3
3	4	0	0	0	0	2	0	0	0	0	6
4	3	1	0	0	0	2	0	0	0	0	6
5	3	0	0	0	0	1	1	0	0	0	5
6	4	0	0	2	0	0	0	0	0	0	6
7	7	0	0	0	0	0	0	2	0	0	9
8	4	1	0	0	0	2	0	0	0	0	7
9	5	0	0	0	0	0	0	0	0	0	5
10	4	0	1	0	0	1	1	2	0	1	10
11	4	0	0	1	0	0	0	0	0	0	5
12	2	0	0	0	1	2	0	0	0	0	5
13	2	1	0	0	0	0	0	1	0	0	4
14	4	0	0	0	0	1	0	0	0	0	5
15	5	0	0	1	0	0	0	0	0	0	6
16	6	1	1	0	0	2	1	1	0	0	12
17	4	0	0	1	0	0	0	0	0	0	5
18	4	0	0	0	0	0	0	0	0	0	4
19	3	0	0	0	0	0	0	1	0	0	4
20	3	0	0	1	0	1	2	0	0	0	7
21	4	1	0	0	0	2	0	0	1	0	8
22	4	0	1	0	0	0	0	0	0	0	5
ALL VA	87	7	4	7	1	18	5	9	1	1	140
AVERAGE	4	0	0	0	0	1	0	0	0	0	6
SD	1	1	0	1	0	1	1	1	0	0	3

PCT = PTSD Clinical Team

SUPT = Substance Use Treatment Team

WSDTT = Women's Stress Disorder Treatment Team

SIPU = Specialized PTSD Inpatient Unit

PSU = PTSD Substance Use Unit

PRRP = PTSD Residential Rehabilitation Program

EBTPU = Evaluation & Brief Treatment Unit

DH = PTSD Day Hospital

WTRP = Women's Trauma Recovery Program

OTHER = Refers to a Specialized Intensive PTSD Program with a substance abuse unit.

* Outlined values are 1 s.d. below the mean of all VISNs and highlight VISNs with low numbers of specialized PTSD programs.

Table 2a. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 1999, FY 2000 and FY 1999-2000 change.

Fiscal Year 2000											SUM
VISN	PCT	SUPT	WSDTT	SIPU	PSU	PRRP	EBTPU	DH	WTRP	OTHER	VISN*
1	6	2	1	1	0	1	0	2	0	0	13
2	2	0	0	0	0	1	0	0	0	0	3
3	4	0	0	0	0	2	0	0	0	0	6
4	3	1	0	0	0	2	0	0	0	0	6
5	3	0	0	0	0	1	1	0	0	0	5
6	4	0	0	2	0	0	0	0	0	0	6
7	7	0	0	0	0	0	0	2	0	0	9
8	4	1	0	0	0	2	0	0	0	0	7
9	5	0	0	0	0	0	0	0	0	0	5
10	4	0	1	0	0	1	1	2	0	1	10
11	4	0	0	1	0	0	0	0	0	0	5
12	2	0	0	0	1	2	0	0	0	0	5
13	2	1	0	0	0	0	0	1	0	0	4
14	4	0	0	0	0	1	0	0	0	0	5
15	5	0	0	1	0	0	0	0	0	0	6
16	6	1	1	0	0	2	1	1	0	0	12
17	4	0	0	1	0	0	0	0	0	0	5
18	4	0	0	0	0	0	0	0	0	0	4
19	3	0	0	0	0	0	0	1	0	0	4
20	3	0	0	1	0	1	2	0	0	0	7
21	4	1	0	0	0	2	0	0	1	0	8
22	4	0	1	0	0	0	0	0	0	0	5
ALL VA	87	7	4	7	1	18	5	9	1	1	140
MEAN	4	0	0	0	0	1	0	0	0	0	6
SD	1	1	0	1	0	1	1	1	0	0	3

Fiscal Year 1999											SUM
VISN	PCT	SUPT	WSDTT	SIPU	PSU	PRRP	EBTPU	DH	WTRP	OTHER	VISN
1	6	2	1	1	0	1	0	2	0	0	13
2	2	0	0	0	0	1	0	0	0	0	3
3	4	0	0	0	0	2	0	0	0	0	6
4	3	1	0	0	0	2	0	0	0	0	6
5	3	0	0	0	0	1	1	0	0	0	5
6	4	0	0	2	0	0	0	0	0	0	6
7	5	0	0	0	0	0	0	3	0	0	8
8	4	1	0	0	0	2	0	0	0	0	7
9	5	0	0	0	0	0	0	0	0	0	5
10	3	0	1	0	0	1	0	2	0	2	9
11	4	0	0	1	0	0	0	0	0	0	5
12	3	0	0	0	1	2	0	0	0	0	6
13	2	1	0	0	0	0	0	1	0	0	4
14	4	0	0	0	0	1	0	0	0	0	5
15	5	0	0	1	0	0	0	0	0	0	6
16	6	1	1	0	0	2	1	1	0	0	12
17	4	0	0	1	0	0	0	0	0	0	5
18	4	0	0	0	0	0	0	0	0	0	4
19	3	0	0	0	0	1	0	1	0	0	5
20	3	0	0	1	0	1	2	0	0	0	7
21	4	1	0	0	0	2	0	0	1	0	8
22	4	0	1	0	0	0	0	0	0	0	5
ALL VA	85	7	4	7	1	19	4	10	1	2	140
MEAN	4	0	0	0	0	1	0	0	0	0	6
SD	1	1	0	1	0	1	0	1	0	0	2

Change in Number of Programs											SUM
VISN	PCT	SUPT	WSDTT	SIPU	PSU	PRRP	EBTPU	DH	WTRP	OTHER	VISN
1	0	0	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0	0	0
4	0	0	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0	0
7	2	0	0	0	0	0	0	-1	0	0	1
8	0	0	0	0	0	0	0	0	0	0	0
9	0	0	0	0	0	0	0	0	0	0	0
10	1	0	0	0	0	0	1	0	0	-1	1
11	0	0	0	0	0	0	0	0	0	0	0
12	-1	0	0	0	0	0	0	0	0	0	-1
13	0	0	0	0	0	0	0	0	0	0	0
14	0	0	0	0	0	0	0	0	0	0	0
15	0	0	0	0	0	0	0	0	0	0	0
16	0	0	0	0	0	0	0	0	0	0	0
17	0	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0	0
19	0	0	0	0	0	-1	0	0	0	0	-1
20	0	0	0	0	0	0	0	0	0	0	0
21	0	0	0	0	0	0	0	0	0	0	0
22	0	0	0	0	0	0	0	0	0	0	0
ALL VA	2	0	0	0	0	-1	1	-1	0	-1	0

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2000: PROGRAM COUNTS BY VAMC.

[illegible]

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2000: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PTSD											SUM
			PCT	SUPT	WSDTT	DH	EBTPU	PRRP	PSU	SIPU	WTRP	OTHER*	VAMC	
9	LEXINGTON	596	X											1
9	LOUISVILLE	603	X											1
9	MEMPHIS	614	X											1
9	MOUNTAIN HOME	621	X											1
9	MIDDLE TENNESSEE HCS: Nashville	626	X											1
10	BRECKSVILLE	541	X		X	X						X		4
10	CHILLICOTHE	538	X											1
10	CINCINNATI	539	X			X	X							3
10	COLUMBUS	757	X											1
10	DAYTON	552							X					1
11	ANN ARBOR HCS	506	X											1
11	BATTLE CREEK	515	X							X				2
11	DANVILLE	550	X											1
11	NORTHERN INDIANA HCS: Marion	610	X											1
12	CHICAGO HCS: West Side	537	X											1
12	HINES	578	X											1
12	MILWAUKEE	695							X					1
12	NORTH CHICAGO	556						X						1
12	TOMAH	676						X						1
13	BLACK HILLS HCS: Fort Meade	568		X										1
13	MINNEAPOLIS	618	X			X								2
13	SIOUX FALLS	438	X											1
14	CENTRAL IOWA HCS: Des Moines	636A6						X						1
14	CENTRAL IOWA HCS: Knoxville	636A7	X											1
14	IOWA CITY	584	X											1
14	NEBRASKA-WESTERN IOWA HCS: Lincoln	636A5	X											1
14	NEBRASKA-WESTERN IOWA HCS: Omaha	636	X											1
15	EASTERN KANSAS HCS: Topeka	677	X							X				2
15	KANSAS CITY	589	X											1
15	POPLAR BLUFF	647	X											1
15	ST. LOUIS	657	X											1
15	WICHITA	452	X											1
16	CENTRAL ARKANSAS VETERANS HCS (North Little Rock)	598						X						1
16	FAYETTEVILLE	564	X											1
16	GULF COAST HCS (Biloxi)	520	X											1
16	HOUSTON	580	X											1
16	JACKSON	586	X			X	X							3
16	NEW ORLEANS	629	X	X	X			X						4
16	OKLAHOMA CITY	635	X											1

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2000: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PTSD										SUM VAMC
			PCT	SUPT	WSDTT	DH	EBTPU	PRRP	PSU	SIPU	WTRP	OTHER*	
17	CENTRAL TEXAS VETERANS HCS: Waco	674A4	X							X			2
17	CENTRAL TEXAS VETERANS HCS: Temple	674	X										1
17	NORTH TEXAS HCS: Dallas Division	549	X										1
17	SOUTH TEXAS VETERANS HCS: San Antonio	671	X										1
18	EL PASO VA HCS	756	X										1
18	NEW MEXICO HCS (Albuquerque)	501	X										1
18	PHOENIX	644	X										1
18	SOUTHERN AZ HCS (Tucson)	678	X										1
19	CHEYENNE	442	X										1
19	DENVER	554				X							1
19	GRAND JUNCTION	575	X										1
19	SALT LAKE CITY	660	X										1
20	BOISE	531	X				X						2
20	PORTLAND	648	X										1
20	PUGET SOUND HCS: American Lake	663A4						X					1
20	PUGET SOUND HCS: Seattle	663	X				X						2
20	ROSEBURG HCS	653								X			1
21	HILO	459GB						X					1
21	HONOLULU	459	X										1
21	NORTHERN CA HCS	612	X										1
21	PALO ALTO HCS: Menlo Park	640						X			X		2
21	PALO ALTO HCS: San Jose	640BY	X										1
21	SAN FRANCISCO	662	X	X									2
22	GREATER LOS ANGELES HCS: East Los Angeles	691GF	X										1
22	GREATER LOS ANGELES HCS: West Los Angeles	691	X										1
22	LOMA LINDA	605	X		X								2
22	SAN DIEGO	664	X										1

* OTHER = Refers to a Specialized Intensive PTSD Program with a substance abuse unit.

Table 4. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, BY VISN, FY 2000.

VISN	<i>Specialized Program FY 2000 Expenditures*</i>				<i>Total Veteran Population SC/Low Inc</i>		<i>Expenditures Per SC/Low Income Veteran**</i>		
	<i>Outpatient</i>	<i>Inpatient/Intensive</i>	<i>Total</i>	<i>% Inpatient/ Intensive</i>			<i>Outpatient</i>	<i>Intensive</i>	<i>Total</i>
1	\$3,151,990	\$1,099,773	\$4,251,763	25.9%	1,500,892	358,094	\$8.80	\$3.07	\$11.87
2	\$667,345	\$408,224	\$1,075,569	38.0%	697,421	194,415	\$3.43	\$2.10	\$5.53
3	\$1,834,833	\$1,626,763	\$3,461,596	47.0%	1,595,593	335,211	\$5.47	\$4.85	\$10.33
4	\$1,859,226	\$1,770,260	\$3,629,486	48.8%	1,819,870	497,402	\$3.74	\$3.56	\$7.30
5	\$1,223,381	\$907,061	\$2,130,442	42.6%	857,564	168,218	\$7.27	\$5.39	\$12.66
6	\$1,220,582	\$1,857,650	\$3,078,232	60.3%	1,251,189	360,885	\$3.38	\$5.15	\$8.53
7	\$2,052,578	\$1,875,359	\$3,927,937	47.7%	1,367,528	399,439	\$5.14	\$4.69	\$9.83
8	\$2,017,896	\$884,648	\$2,902,544	30.5%	1,634,357	482,839	\$4.18	\$1.83	\$6.01
9	\$987,671	\$0	\$987,671	0.0%	1,060,416	367,654	\$2.69	\$0.00	\$2.69
10	\$2,286,703	\$1,332,652	\$3,619,355	36.8%	1,151,473	318,983	\$7.17	\$4.18	\$11.35
11	\$1,188,266	\$997,944	\$2,186,209	45.6%	1,651,186	427,356	\$2.78	\$2.34	\$5.12
12	\$898,823	\$1,738,210	\$2,637,033	65.9%	1,362,314	319,235	\$2.82	\$5.44	\$8.26
13	\$1,517,789	\$73,628	\$1,591,418	4.6%	707,005	210,110	\$7.22	\$0.35	\$7.57
14	\$1,109,577	\$127,232	\$1,236,809	10.3%	516,075	153,798	\$7.21	\$0.83	\$8.04
15	\$1,901,564	\$1,170,077	\$3,071,641	38.1%	1,071,604	329,293	\$5.77	\$3.55	\$9.33
16	\$4,562,347	\$1,365,089	\$5,927,436	23.0%	1,887,301	651,983	\$7.00	\$2.09	\$9.09
17	\$1,593,000	\$1,173,073	\$2,766,073	42.4%	1,026,699	321,378	\$4.96	\$3.65	\$8.61
18	\$1,660,733	\$0	\$1,660,733	0.0%	842,132	276,151	\$6.01	\$0.00	\$6.01
19	\$939,267	\$525,253	\$1,464,519	35.9%	731,842	215,445	\$4.36	\$2.44	\$6.80
20	\$2,748,657	\$1,882,573	\$4,631,230	40.6%	1,191,422	342,926	\$8.02	\$5.49	\$13.51
21	\$1,975,577	\$2,989,063	\$4,964,640	60.2%	1,418,772	338,504	\$5.84	\$8.83	\$14.67
22	\$1,839,991	\$0	\$1,839,991	0.0%	1,841,007	418,847	\$4.39	\$0.00	\$4.39
ALL VA	\$39,237,794	\$23,804,532	\$63,042,327	37.8%	27,183,662	7,488,166	\$5.24	\$3.18	\$8.42
AVERAGE	\$1,783,536	\$1,082,024	\$2,865,560	33.8%	1,235,621	340,371	\$5.35	\$3.17	\$8.52
SD	\$850,262	\$773,140	\$1,315,680	19.6%	397,725	113,743	\$1.79	\$2.21	\$2.98
CV	0.48	0.71	0.46	0.58	0.32	0.33	0.33	0.69	0.35

Note: No specialized Intensive PTSD Program was opened in VISNs 9, 18, or 22 for this time period.

* Total Expenditures = "All Other dollars plus total salary dollars for both centrally-funded and station-funded FTEE that were spent for the program as reported in the FY 1999 Annual Report.

** Bolded (underlined) values are 1 s.d. above the mean of all VISNs, outlined values are 1 s.d. below the mean.

[illegible]

[illegible]

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, FY 2000.

VISN	STANUM	STATE	PCT	SUPT	WSDTT	PTSDDH	EBTPU	PRRP	PSU	SIPU	WTRP	OTHER*	SUM VAMC
17	CENTRAL TX VETERANS HCS: Temple	TX	\$389,058										\$389,058
17	CENTRAL TX VETERANS HCS: Waco	TX	\$288,579							\$1,173,073			\$1,461,652
17	NORTH TX HCS: Dallas	TX	\$430,572										\$430,572
17	SOUTH TX VETERANS HCS: San Antonio	TX	\$484,791										\$484,791
18	EL PASO VA HCS	TX	\$331,245										\$331,245
18	NEW MEXICO HCS (Albuquerque)	NM	\$649,511										\$649,511
18	PHOENIX	AZ	\$430,384										\$430,384
18	SOUTHERN AZ HCS (Tucson)	AZ	\$249,593										\$249,593
19	CHEYENNE	WY	\$142,659										\$142,659
19	DENVER	CO				\$525,253							\$525,253
19	GRAND JUNCTION	CO	\$149,710										\$149,710
19	SALT LAKE CITY	UT	\$646,898										\$646,898
20	BOISE	ID	\$505,846				\$275,577						\$781,423
20	PORTLAND	OR	\$598,669										\$598,669
20	PUGET SOUND HCS: American Lake	WA						\$504,173					\$504,173
20	PUGET SOUND HCS: Seattle	WA	\$1,644,142				\$821,916						\$2,466,058
20	ROSEBURG HCS	OR								\$280,908			\$280,908
21	HILO	HI						\$1,028,683					\$1,028,683
21	HONOLULU	HI	\$324,969										\$324,969
21	NORTHERN CA HCS	CA	\$402,845										\$402,845
21	PALO ALTO HCS	CA						\$1,436,757					\$2,150,052
21	PALO ALTO HCS: San Jose	CA	\$189,671								\$523,624		\$2,150,052
21	SAN FRANCISCO	CA	\$861,670	\$196,422									\$1,058,092
22	GREATER LOS ANGELES HCS: East LA	CA	\$323,040										\$323,040
22	GREATER LOS ANGELES HCS: West LA	CA	\$729,899										\$729,899
22	LOMA LINDA	CA	\$93,377			\$240,018							\$333,395
22	SAN DIEGO	CA	\$453,656										\$453,656

* OTHER = Refers to a Specialized Intensive PTSD Program with a substance abuse unit.

Data for TABLE 6 are not available for this fiscal year.
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Table 7. INTENSITY DATA: SOPPs by VISN: FY 2000.

SOPPs WORKLOAD				Total Vet	Eligible for	All VA MH	Population-Based Workload*	
VISN	Veterans	Visits	Vis/Vet*	Population	VA Services	Service Users	Per 1,000 Elig.	Pct. MH Users
1	3,739	43,153	11.54	1,500,892	358,094	36,647	10.44	10.2%
2	1,047	14,060	13.43	697,421	194,415	17,933	5.39	5.8%
3	2,576	36,805	14.29	1,595,593	335,211	30,055	7.68	8.6%
4	1,929	16,769	8.69	1,819,870	497,402	36,574	3.88	5.3%
5	1,657	19,341	11.67	857,564	168,218	17,212	9.85	9.6%
6	2,278	14,632	6.42	1,251,189	360,885	30,572	6.31	7.5%
7	2,972	24,128	8.12	1,367,528	399,439	37,713	7.44	7.9%
8	2,737	23,885	8.73	1,634,357	482,839	60,292	5.67	4.5%
9	1,756	13,778	7.85	1,060,416	367,654	31,021	4.78	5.7%
10	2,296	21,880	9.53	1,151,473	318,983	30,467	7.20	7.5%
11	1,664	15,302	9.20	1,651,186	427,356	28,173	3.89	5.9%
12	826	11,145	13.49	1,362,314	319,235	26,594	2.59	3.1%
13	1,291	14,922	11.56	707,005	210,110	17,428	6.14	7.4%
14	1,193	9,403	7.88	516,075	153,798	10,338	7.76	11.5%
15	2,400	30,316	12.63	1,071,604	329,293	29,017	7.29	8.3%
16	6,088	60,096	9.87	1,887,301	651,983	60,051	9.34	10.1%
17	2,641	27,658	10.47	1,026,699	321,378	27,057	8.22	9.8%
18	3,034	32,013	10.55	842,132	276,151	27,193	10.99	11.2%
19	1,481	12,667	8.55	731,842	215,445	19,775	6.87	7.5%
20	4,307	44,009	10.22	1,191,422	342,926	34,014	12.56	12.7%
21	2,997	29,039	9.69	1,418,772	338,504	30,493	8.85	9.8%
22	2,573	24,975	9.71	1,841,007	418,847	38,900	6.14	6.6%
ALL VA	53,192	539,976	10.15	27,183,662	7,488,166	677,519	7.10	7.9%
AVERAGE	2,431	24,544	10.19	1,235,621	340,371	30,796	7.24	8.0%
SD	1,166	12,442	2.01	397,725	113,743	11,758	2.41	2.4%
CV	0.48	0.51	0.20	0.32	0.33	0.38	0.33	0.30
			8.18				4.83	5.65%

* Outlined values are 1 s.d. below the mean of all VISNs and reflect low intensity and low population coverage in outpatient specialized PTSD service delivery.

Table 7a. INTENSITY DATA: SOPPs by VISN: FY 1999, FY 2000 and FY 1999-2000 change.

VISN	FY 1999			FY 2000			% Change: FY 2000 - 1999		
	SOPPs WORKLOAD			SOPPs WORKLOAD			SOPPs WORKLOAD		
	Veterans	Visits	Visits/Vet	Veterans	Visits	Vis/Vet*	Veterans	Visits	Visits/Vet
1	3,633	44,690	12.3	3,739	43,153	11.5	2.9%	-3.4%	-6.2%
2	831	8,613	10.4	1,047	14,060	13.4	26.0%	63.2%	29.6%
3	1,520	33,129	21.8	2,576	36,805	14.3	69.5%	11.1%	-34.4%
4	2,058	15,462	7.5	1,929	16,769	8.7	-6.3%	8.5%	15.7%
5	2,467	18,287	7.4	1,657	19,341	11.7	-32.8%	5.8%	57.5%
6	2,402	14,866	6.2	2,278	14,632	6.4	-5.2%	-1.6%	3.8%
7	2,527	25,067	9.9	2,972	24,128	8.1	17.6%	-3.7%	-18.2%
8	2,740	26,219	9.6	2,737	23,885	8.7	-0.1%	-8.9%	-8.8%
9	1,763	13,019	7.4	1,756	13,778	7.8	-0.4%	5.8%	6.3%
10	1,787	14,086	7.9	2,296	21,880	9.5	28.5%	55.3%	20.9%
11	1,626	12,724	7.8	1,664	15,302	9.2	2.3%	20.3%	17.5%
12	885	11,291	12.8	826	11,145	13.5	-6.7%	-1.3%	5.8%
13	1,284	15,717	12.2	1,291	14,922	11.6	0.5%	-5.1%	-5.6%
14	1,206	13,067	10.8	1,193	9,403	7.9	-1.1%	-28.0%	-27.3%
15	2,291	28,027	12.2	2,400	30,316	12.6	4.8%	8.2%	3.3%
16	5,607	51,472	9.2	6,088	60,096	9.9	8.6%	16.8%	7.5%
17	2,364	24,955	10.6	2,641	27,658	10.5	11.7%	10.8%	-0.8%
18	2,978	29,308	9.8	3,034	32,013	10.6	1.9%	9.2%	7.2%
19	1,364	11,652	8.5	1,481	12,667	8.6	8.6%	8.7%	0.1%
20	3,556	38,486	10.8	4,307	44,009	10.2	21.1%	14.4%	-5.6%
21	3,264	31,623	9.7	2,997	29,039	9.7	-8.2%	-8.2%	0.0%
22	2,672	26,191	9.8	2,573	24,975	9.7	-3.7%	-4.6%	-1.0%
ALL VA	50,488	507,951	10.1	53,192	539,976	10.2	5.4%	6.3%	0.9%
AVERAGE	2,310	23,089	10.2	2,431	24,544	10.19	6.3%	7.9%	3.1%
SD	1,067	11,374	3.1	1,166	12,442	2.01	18.8%	19.3%	18.6%
CV	0.46	0.49	0.30	0.48	0.51	0.20	2.96	2.45	6.08

TABLE 7b. INTENSITY DATA: Unique Veterans Seen and Treated by SOPPs, Fiscal Years 1996 - 2000, by VISN.

VISN	1996		1997		1998		1999		2000	
	Number of Vets Seen	Number of Vets Treated	Number of Vets Seen	Number of Vets Treated	Number of Vets Seen	Number of Vets Treated	Number of Vets Seen	Number of Vets Treated	Number of Vets Seen	Number of Vets Treated
1	3275	2381	2830	2228	3551	2778	3,633	2797	3,739	2936
2	523	418	527	427	812	589	831	628	1,047	846
3	1415	1065	1938	1409	2382	1709	1,520	1182	2,576	2018
4	2090	1375	3084	2028	2989	1804	2,058	1497	1,929	1412
5	1019	749	1183	897	1460	1024	2,467	1327	1,657	1110
6	1823	1414	2129	1634	2365	1820	2,402	1781	2,278	1723
7	1620	1177	2153	1589	2371	1777	2,527	1889	2,972	2060
8	1692	1189	2191	1536	2626	2109	2,740	2273	2,737	2254
9	1667	1245	2405	1740	2288	1683	1,763	1313	1,756	1415
10	692	560	711	566	1023	704	1,787	1316	2,296	1662
11	1506	1050	1530	1106	1541	1204	1,626	1250	1,664	1288
12	881	679	1134	887	1155	936	885	725	826	681
13	1605	1216	1149	909	1298	1019	1,284	1048	1,291	1111
14	1037	741	794	539	1432	1098	1,206	922	1,193	898
15	1493	1135	1830	1389	1987	1561	2,291	1854	2,400	1930
16	4128	3015	4507	3360	5128	3797	5,607	4295	6,088	4840
17	1669	1317	1854	1492	2229	1756	2,364	1900	2,641	2071
18	2258	1628	2514	1752	2610	1945	2,978	2215	3,034	2352
19	1228	924	1429	1013	1142	889	1,364	1038	1,481	1098
20	2003	1477	2295	1778	3372	2605	3,556	2880	4,307	3339
21	1594	1242	2467	1730	3057	2209	3,264	2305	2,997	2106
22	984	712	1566	1136	2079	1518	2,672	1931	2,573	1927
SUM	36,202	26,709	42,220	31,145	48,897	36,534	50,825	38,366	53,482	41,077
All VA	35,823	26,537	41,959	31,024	48,569	36,375	50,488	38,213	53,192	40,957
MEAN	1646	1214	1919	1416	2223	1661	2310	1744	2431	1867
SD	810	582	901	654	1013	753	1092	843	1194	942

TABLE 7c. INTENSITY DATA: Unique New Veterans Seen and Treated by SOPPs, Fiscal Years 1996 - 2000, by VISN.

VISN	1996		1997		1998		1999		2000	
	Number of New Vets Seen	Number of New Vets Treated	Number of New Vets Seen	Number of New Vets Treated	Number of New Vets Seen	Number of New Vets Treated	Number of New Vets Seen	Number of New Vets Treated	Number of New Vets Seen	Number of New Vets Treated
1	1617	949	1282	832	1722	1171	1393	830	1478	947
2	166	98	199	127	461	270	354	197	559	396
3	717	428	1060	613	1155	583	623	348	1581	1088
4	997	478	1719	845	1486	626	867	464	772	429
5	648	433	637	412	825	480	1707	667	888	476
6	901	587	960	593	993	607	833	467	778	436
7	854	510	1149	724	1088	655	1067	608	1479	782
8	852	460	1260	704	1122	707	951	613	871	521
9	988	644	1395	872	922	555	688	414	655	422
10	317	217	271	167	574	318	1164	774	1234	721
11	664	331	650	328	605	352	621	351	653	376
12	516	346	598	411	542	382	293	191	338	236
13	781	481	483	310	535	325	446	276	412	282
14	460	239	394	213	920	639	418	227	442	238
15	657	406	948	603	836	531	933	604	848	518
16	1865	996	1929	1072	2161	1161	2159	1245	2093	1285
17	964	702	824	541	1038	674	1038	691	1150	746
18	1175	669	1220	658	1269	773	1373	837	1207	718
19	613	381	763	441	567	380	668	427	672	388
20	1057	656	1146	774	1906	1293	1569	1094	2156	1443
21	880	599	1532	895	1725	1065	1490	821	1318	704
22	486	276	966	603	1255	807	1492	976	1023	604
SUM	18,175	10,886	21,385	12,738	23,707	14,354	22,147	13,122	22,607	13,756
All VA	18,080	10,847	21,308	12,719	23,631	14,328	22,070	13,104	22,531	13,736
MEAN	826	495	972	579	1078	652	1007	596	1028	625
SD	387	221	456	255	479	294	492	293	503	326

Table 8. INTENSITY DATA: SOPPs by INDIVIDUAL PROGRAM, FY 2000.

VISN	FACILITY		PROGRAM	# VISITS	# VETERANS	VISITS/ VETERANS *
1	BOSTON HCS: Boston	MA	PCT	4857	611	7.9
1	BOSTON HCS: Boston	MA	WSDTT	2442	172	14.2
1	BOSTON HCS: Brockton	MA	PCT	4236	595	7.1
1	BOSTON HCS: Brockton	MA	SUPT	1567	207	7.6
1	CT HCS: West Haven	CT	PCT	9414	691	13.6
1	CT HCS: West Haven	CT	SUPT	4856	296	16.4
1	MANCHESTER	NH	PCT	3825	541	7.1
1	PROVIDENCE	RI	PCT	10052	1147	8.8
1	WHITE RIVER JUNCTION	VT	PCT	1904	400	4.8
2	CANANDAIGUA	NY	PCT	7475	888	8.4
2	WESTERN NY HCS: Batavia	NY	PCT	6585	906	7.3
3	BRONX	NY	PCT	11681	855	13.7
3	NEW YORK HARBOR HCS: Brooklyn	NY	PCT	9568	1192	8.0
3	NEW YORK HARBOR HCS: New York	NY	PCT	12021	1023	11.8
3	NJ HCS: East Orange	NJ	PCT	3535	513	6.9
4	COATESVILLE	PA	PCT	4363	480	9.1
4	PHILADELPHIA	PA	PCT	2892	544	5.3
4	PITTSBURGH HCS: Highland Drive	PA	PCT	6166	847	7.3
4	PITTSBURGH HCS: Highland Drive	PA	SUPT	3348	328	10.2
5	MD HCS: Baltimore	MD	PCT	4761	920	5.2
5	MD HCS: Perry Point	MD	PCT	3152	416	7.6
5	WASHINGTON, DC	DC	PCT	11428	1037	11.0
6	ASHEVILLE	NC	PCT	822	110	7.5
6	DURHAM	NC	PCT	3915	987	4.0
6	HAMPTON	VA	PCT	6476	1280	5.1
6	SALISBURY	VA	PCT	3419	475	7.2
7	ATLANTA	GA	PCT	6184	634	9.8
7	AUGUSTA	GA	PCT	NR	NR	NC
7	BIRMINGHAM	AL	PCT	4681	812	5.8
7	CENTRAL AL VETERANS HCS: Tuskegee	AL	PCT	3171	358	8.9
7	CHARLESTON	SC	PCT	2005	1655	1.2
7	DUBLIN	GA	PCT	868	216	4.0
7	TUSCALOOSA	AL	PCT	7219	1199	6.0
8	BAY PINES	FL	SUPT	7985	1116	7.2
8	MIAMI	FL	PCT	4366	493	8.9
8	NO.FL/SO.GA VETERANS HS: Gainesville	FL	PCT	3494	568	6.2
8	SAN JUAN	PR	PCT	2918	515	5.7
8	TAMPA	FL	PCT	5122	695	7.4
9	LEXINGTON	KY	PCT	3347	349	9.6
9	LOUISVILLE	KY	PCT	1677	295	5.7
9	MEMPHIS	TN	PCT	3376	589	5.7
9	MIDDLE TN HCS: Nashville	TN	PCT	0**	0**	NC
9	MOUNTAIN HOME	TN	PCT	5378	1001	5.4

Table 8. INTENSITY DATA: SOPPs by INDIVIDUAL PROGRAM, FY 2000.

VISN	FACILITY		PROGRAM	# VISITS	# VETERANS	VISITS/ VETERANS *
10	BRECKSVILLE	OH	PCT	11739	1059	11.1
10	BRECKSVILLE	OH	WSDTT	1551	253	6.1
10	CHILLICOTHE	OH	PCT	3015	642	4.7
10	CINCINNATI	OH	PCT	4879	706	6.9
10	COLUMBUS	OH	PCT	696	115	6.1
11	ANN ARBOR HCS	MI	PCT	3580	296	12.1
11	BATTLE CREEK	MI	PCT	6258	1032	6.1
11	DANVILLE	IL	PCT	2965	504	5.9
11	NORTHERN IN HCS: Marion	IN	PCT	2499	391	6.4
12	CHICAGO HCS: West Side	IL	PCT	8002	752	10.6
12	HINES	IL	PCT	3143	374	8.4
13	BLACK HILLS HCS: Fort Meade	WI	SUPT	4251	360	11.8
13	MINNEAPOLIS	MN	PCT	9256	935	9.9
13	SIOUX FALLS	SD	PCT	1415	200	7.1
14	CENTRAL IA HCS: Knoxville	IA	PCT	1373	181	7.6
14	IOWA CITY	IA	PCT	4054	685	5.9
14	NE-WESTERN IA HCS: Lincoln	NE	PCT	1134	196	5.8
14	NE-WESTERN IA HCS: Omaha	NE	PCT	2842	411	6.9
15	EASTERN KS HCS: Topeka	KS	PCT	9599	842	11.4
15	KANSAS CITY	MO	PCT	4489	565	7.9
15	POPLAR BLUFF	MO	PCT	1659	301	5.5
15	ST. LOUIS	MO	PCT	9311	1160	8.0
15	WICHITA	KS	PCT	5258	533	9.9
16	FAYETTEVILLE	AR	PCT	5320	1123	4.7
16	GULF COAST VETERANS HCS (Biloxi)	MS	PCT	5318	1035	5.1
16	HOUSTON	TX	PCT	15220	1982	7.7
16	JACKSON	MS	PCT	6573	1057	6.2
16	NEW ORLEANS	LA	PCT	14469	2074	7.0
16	NEW ORLEANS	LA	SUPT	1943	259	7.5
16	NEW ORLEANS	LA	WSDTT	748	113	6.6
16	OKLAHOMA CITY	OK	PCT	10505	795	13.2
17	CENTRAL TX VETERANS HCS: Temple	TX	PCT	5251	883	5.9
17	CENTRAL TX VETERANS HCS: Waco	TX	PCT	5682	517	11.0
17	NORTH TX HCS: Dallas	TX	PCT	7730	909	8.5
17	SOUTH TX VETERANS HCS: San Antonio	TX	PCT	8995	1125	8.0
18	EL PASO VA HCS	TX	PCT	7814	911	8.6
18	NEW MEXICO HCS (Albuquerque)	NM	PCT	13419	1556	8.6
18	PHOENIX	AZ	PCT	6544	711	9.2
18	SOUTHERN AZ HCS (Tucson)	AZ	PCT	4236	697	6.1
19	CHEYENNE	WY	PCT	881	171	5.2
19	GRAND JUNCTION	CO	PCT	2562	457	5.6
19	SALT LAKE CITY	UT	PCT	9224	1086	8.5
20	BOISE	ID	PCT	5024	571	8.8
20	PORTLAND	OR	PCT	8033	1531	5.2
20	PUGET SOUND HCS: Seattle	WA	PCT	30952	4124	7.5

Table 8. INTENSITY DATA: SOPPs by INDIVIDUAL PROGRAM, FY 2000.

VISN	FACILITY		PROGRAM	# VISITS	# VETERANS	VISITS/ VETERANS *
21	HONOLULU	HI	PCT	5595	647	8.6
21	NORTHERN CA HCS	CA	PCT	2233	524	4.3
21	PALO ALTO HCS: San Jose	CA	PCT	5784	784	7.4
21	SAN FRANCISCO	CA	PCT	11855	1832	6.5
21	SAN FRANCISCO	CA	SUPT	3572	149	24.0
22	GREATER LOS ANGELES HCS: East LA	CA	PCT	4138	618	6.7
22	GREATER LOS ANGELES HCS: West LA	CA	PCT	6392	762	8.4
22	LOMA LINDA	CA	PCT	2909	306	9.5
22	LOMA LINDA	CA	WSDTT	2244	232	9.7
22	SAN DIEGO	CA	PCT	9292	1120	8.3
SUM				539976	71110	7.6
ALL VA				539976	53192	10.2
AVERAGE				5510	726	7.8
SD				4247	546	3.2
CV				0.77	0.75	0.41

* Outlined values are 1 s.d. below the mean.

** Due to administrative restructuring, data were not reported for this program for the current fiscal year.

NC = Data were not calculated because data were not reported or unreliable.

Table 9. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 2000 Annual VA Census.*

VISN	<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>				<i>Total Occupied PTSD Beds</i>	<i>Total Vet Population</i>	<i>Eligible for VA Services</i>	PTSD Beds Per 10,000 Elig.
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS				
1	247	26	10.5%	9.8	272	21	7.7%	54.43	47	1,500,892	358,094	1.31
2	104	1	1.0%	5.0	288	12	4.2%	22.33	13	697,421	194,415	0.67
3	392	8	2.0%	18.3	300	47	15.7%	35.19	55	1,595,593	335,211	1.64
4	207	10	4.8%	9.6	414	44	10.6%	27.18	54	1,819,870	497,402	1.09
5	198	7	3.5%	4.0	347	45	13.0%	108.13	52	857,564	168,218	3.09
6	284	48	16.9%	12.5	215	3	1.4%	42.33	51	1,251,189	360,885	1.41
7	244	18	7.4%	23.4	172	15	8.7%	54.07	33	1,367,528	399,439	0.83
8	110	6	5.5%	5.3	214	23	10.7%	105.61	29	1,634,357	482,839	0.60
9	207	3	1.4%	3.3	341	3	0.9%	266.00	6	1,060,416	367,654	0.16
10	142	5	3.5%	4.8	368	29	7.9%	33.69	34	1,151,473	318,983	1.07
11	307	3	1.0%	25.3	91	25	27.5%	10.08	28	1,651,186	427,356	0.66
12	259	6	2.3%	10.2	621	43	6.9%	40.53	49	1,362,314	319,235	1.53
13	42	2	4.8%	5.5	254	12	4.7%	25.58	14	707,005	210,110	0.67
14	55	0	0.0%	0.0	83	7	8.4%	33.14	7	516,075	153,798	0.46
15	189	37	19.6%	34.2	256	4	1.6%	91.75	41	1,071,604	329,293	1.25
16	267	6	2.2%	25.7	278	32	11.5%	27.03	38	1,887,301	651,983	0.58
17	296	28	9.5%	27.2	630	9	1.4%	134.00	37	1,026,699	321,378	1.15
18	66	2	3.0%	1.0	132	1	0.8%	2.00	3	842,132	276,151	0.11
19	101	5	5.0%	9.4	14	5	35.7%	20.00	10	731,842	215,445	0.46
20	102	28	27.5%	15.4	953	47	4.9%	109.38	75	1,191,422	342,926	2.19
21	131	1	0.8%	4.0	160	36	22.5%	47.50	37	1,418,772	338,504	1.09
22	156	5	3.2%	16.4	307	37	12.1%	142.43	42	1,841,007	418,847	1.00
ALL VA	4,106	255	6.2%	17.7	6,710	500	7.5%	62.9	755	27,183,662	7,488,166	1.01
AVERAGE	187	12	6.2%	12.3	305	23	9.9%	65.1	34	1,235,621	340,371	1.05
SD	91	13	6.8%	9.4	204	16	8.7%	59.2	19	397,725	113,743	0.66
CV	0.49	1.12	1.10	0.77	0.67	0.71	0.88	0.91	0.54	0.32	0.33	0.63

* Bolded (underlined) values are 1 s.d. above the mean of all VISNs, outlined values are 1 s.d. below the mean.

Table 9a. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 1999, FY 2000, and FY 1999-2000 change.

VISN	FY 1999								FY 2000								% Change: FY 1999 - FY 2000							
	<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>				<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>				<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>			
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS
1	297	31	10.4%	18.5	323	9	2.8%	54.2	247	26	10.5%	9.8	272	21	7.7%	54.43	-16.8%	-16.1%	0.8%	-46.7%	-15.8%	133.3%	177.1%	0.4%
2	90	1	1.1%	7.0	360	13	3.6%	15.9	104	1	1.0%	5.0	288	12	4.2%	22.33	15.6%	0.0%	-13.5%	-28.6%	-20.0%	-7.7%	15.4%	40.3%
3	456	7	1.5%	19.4	414	43	10.4%	28.3	392	8	2.0%	18.3	300	47	15.7%	35.19	-14.0%	14.3%	32.9%	-6.1%	-27.5%	9.3%	50.8%	24.4%
4	254	7	2.8%	3.7	347	34	9.8%	31.3	207	10	4.8%	9.6	414	44	10.6%	27.18	-18.5%	42.9%	75.3%	158.5%	19.3%	29.4%	8.5%	-13.1%
5	190	5	2.6%	13.0	423	79	18.7%	113.6	198	7	3.5%	4.0	347	45	13.0%	108.13	4.2%	40.0%	34.3%	-69.2%	-18.0%	-43.0%	-30.6%	-4.8%
6	289	45	15.6%	15.7	287	4	1.4%	83.3	284	48	16.9%	12.5	215	3	1.4%	42.33	-1.7%	6.7%	8.5%	-20.3%	-25.1%	-25.0%	0.1%	-49.1%
7	247	14	5.7%	14.5	245	15	6.1%	95.9	244	18	7.4%	23.4	172	15	8.7%	54.07	-1.2%	28.6%	30.2%	61.3%	-29.8%	0.0%	42.4%	-43.6%
8	135	16	11.9%	2.6	208	48	23.1%	78.8	110	6	5.5%	5.3	214	23	10.7%	105.61	-18.5%	-62.5%	-54.0%	103.2%	2.9%	-52.1%	-53.4%	34.0%
9	230	9	3.9%	10.6	424	7	1.7%	99.4	207	3	1.4%	3.3	341	3	0.9%	266.00	-10.0%	-66.7%	-63.0%	-68.4%	-19.6%	-57.1%	-46.7%	167.5%
10	129	6	4.7%	5.8	411	29	7.1%	47.1	142	5	3.5%	4.8	368	29	7.9%	33.69	10.1%	-16.7%	-24.3%	-17.7%	-10.5%	0.0%	11.7%	-28.5%
11	400	6	1.5%	16.7	116	24	20.7%	36.4	307	3	1.0%	25.3	91	25	27.5%	10.08	-23.3%	-50.0%	-34.9%	52.0%	-21.6%	4.2%	32.8%	-72.3%
12	309	11	3.6%	25.7	732	47	6.4%	30.1	259	6	2.3%	10.2	621	43	6.9%	40.53	-16.2%	-45.5%	-34.9%	-60.5%	-15.2%	-8.5%	7.8%	34.8%
13	49	1	2.0%	2.0	273	7	2.6%	38.3	42	2	4.8%	5.5	254	12	4.7%	25.58	-14.3%	100.0%	133.3%	175.0%	-7.0%	71.4%	84.3%	-33.2%
14	49	2	4.1%	5.0	74	6	8.1%	24.7	55	0	0.0%	0.0	83	7	8.4%	33.14	12.2%	-100.0%	-100.0%	-100.0%	12.2%	16.7%	4.0%	34.4%
15	197	35	17.8%	34.4	300	4	1.3%	76.0	189	37	19.6%	34.2	256	4	1.6%	91.75	-4.1%	5.7%	10.2%	-0.7%	-14.7%	0.0%	17.2%	20.7%
16	199	9	4.5%	16.1	225	14	6.2%	54.8	267	6	2.2%	25.7	278	32	11.5%	27.03	34.2%	-33.3%	-50.3%	59.3%	23.6%	128.6%	85.0%	-50.7%
17	312	35	11.2%	23.5	822	8	1.0%	138.8	296	28	9.5%	27.2	630	9	1.4%	134.00	-5.1%	-20.0%	-15.7%	15.9%	-23.4%	12.5%	46.8%	-3.4%
18	72	2	2.8%	9.0	141	4	2.8%	35.3	66	2	3.0%	1.0	132	1	0.8%	2.00	-8.3%	0.0%	9.1%	-88.9%	-6.4%			
19	97	7	7.2%	8.3	14	9	64.3%	29.2	101	5	5.0%	9.4	14	5	35.7%	20.00	4.1%	-28.6%	-31.4%	13.4%	0.0%	-44.4%	-44.4%	-31.6%
20	109	36	33.0%	10.1	897	33	3.7%	90.6	102	28	27.5%	15.4	953	47	4.9%	109.38	-6.4%	-22.2%	-16.9%	52.2%	6.2%	42.4%	34.1%	20.7%
21	128	7	5.5%	11.4	201	33	16.4%	34.6	131	1	0.8%	4.0	160	36	22.5%	47.50	2.3%	-85.7%	-86.0%	-65.0%	-20.4%	9.1%	37.0%	37.3%
22	164	5	3.0%	78.4	302	32	10.6%	88.8	156	5	3.2%	16.4	307	37	12.1%	142.43	-4.9%	0.0%	5.1%	-79.1%	1.7%	15.6%	13.7%	60.5%
ALL VA	4,402	297	6.7%	18.1	7,539	502	6.7%	63.4	4,106	255	6.2%	17.7	6,710	500	7.5%	62.9	-6.7%	-14.1%	-8.0%	-2.0%	-11.0%	-0.4%	11.9%	-0.7%
AVERAGE	200	14	7.1%	16.0	343	23	10.4%	60.2	187	12	6.2%	12.3	305	23	9.9%	65.1	-3.7%	-14.1%	-8.4%	1.8%	-9.5%	11.2%	23.5%	6.9%
SD	109	13	7.2%	15.7	219	19	13.4%	33.2	91	13	6.8%	9.4	204	16	8.7%	59.2	13.2%	44.6%	50.9%	75.3%	14.8%	49.2%	50.3%	50.7%
CV	0.55	0.97	1.02	0.98	0.64	0.83	1.29	0.6	0.49	1.12	1.10	0.77	0.67	0.71	0.88	0.91	-3.61	-3.18	-6.05	41.82	-1.56	4.41	2.14	7.36

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2000 Census

VISN	VAMC	STATION VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
1	BEDFORD	518	61		0.00%		73	3	4.11%	50.7
1	BOSTON HCS †	523	28	2	7.14%	4.5	177	11	6.21%	54.1
1	CONNECTICUT HCS †	689	26	1	3.85%	10.0	11	7	63.64%	56.6
1	MANCHESTER	608								
1	NORTHAMPTON	631	102	21	20.59%	11.1	11		0.00%	
1	PROVIDENCE	650	13	1	7.69%	3.0				
1	TOGUS	402	15		0.00%					
1	WHITE RIVER JCT	405	2	1	50.00%	1.0				
2	ALBANY	500	11	1	9.09%	5.0				
2	BATH	514								
2	CANANDAIGUA	532	57		0.00%					
2	SYRACUSE	670	16		0.00%					
2	WESTERN NEW YORK HCS †	528	20		0.00%		288	12	4.17%	22.3
3	BRONX	526	38		0.00%					
3	HUDSON VALLEY HCS †	620	87		0.00%		123	25	20.33%	48.6
3	NEW JERSEY HCS †	561	112	2	1.79%	11.0	97	19	19.59%	19.4
3	NEW YORK HARBOR HCS †	630	56	3	5.36%	7.0	48		0.00%	
3	NORTHPORT	632	99	3	3.03%	34.3	32	3	9.38%	23.3
4	ALTOONA	503								
4	BUTLER	529					49		0.00%	
4	CLARKSBURG	540	0				13	8	61.54%	29.8
4	COATESVILLE	542	71	3	4.23%	8.7	209	34	16.27%	24.9
4	ERIE	562								
4	LEBANON	595	19		0.00%		46		0.00%	
4	PHILADELPHIA	642	21	4	19.05%	11.8				
4	PITTSBURGH HCS †	646	85	3	3.53%	7.7	90	2	2.22%	56.5
4	WILKES BARRE	693	11		0.00%		7		0.00%	
4	WILMINGTON	460								
5	MARTINSBURG	613	12	1	8.33%	0.0	295	45	15.25%	108.1
5	MARYLAND HCS †	512	161	3	1.86%	6.7	52		0.00%	
5	WASHINGTON	688	25	3	12.00%	2.7				
6	ASHEVILLE	637	10	2	20.00%	8.5	15		0.00%	
6	BECKLEY	517								
6	DURHAM	558	15	3	20.00%	8.7				
6	FAYETTEVILLE NC	565	17	2	11.76%	3.0				
6	HAMPTON	590	30	2	6.67%	3.5	159	3	1.89%	42.3
6	RICHMOND	652	9		0.00%					
6	SALEM	658	91	15	16.48%	12.7	14		0.00%	
6	SALISBURY	659	112	24	21.43%	14.8	27		0.00%	

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2000 Census

VISN	VAMC	STATION VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
7	ATLANTA	508	20	3	15.00%	7.3	7		0.00%	
7	AUGUSTA	509	57	7	12.28%	33.7	30	6	20.00%	60.3
7	BIRMINGHAM	521								
7	CENTRAL ALABAMA VETERANS HCS †	619	39	1	2.56%	8.0	20	1	5.00%	16.0
7	CHARLESTON	534	10	1	10.00%	3.0				
7	COLUMBIA SC	544	11	2	18.18%	6.5				
7	DUBLIN	557					115	8	6.96%	54.1
7	TUSCALOOSA	679	107	4	3.74%	34.8				
8	BAY PINES	516	15		0.00%		140	20	14.29%	113.7
8	MIAMI	546	18	1	5.56%	4.0	31	3	9.68%	51.7
8	NO. FLORIDA/SO. GEORGIA VETERANS HCS †	573	12		0.00%		28		0.00%	
8	SAN JUAN	672	26	1	3.85%	5.0				
8	TAMPA	673	20	2	10.00%	3.0	15		0.00%	
8	W PALM BEACH	548	19	2	10.53%	8.5				
9	HUNTINGTON	581								
9	LEXINGTON	596	10		0.00%					
9	LOUISVILLE	603	9		0.00%					
9	MIDDLE TENNESSEE HCS: MURFREESBORO †	622	139		0.00%					
9	MIDDLE TENNESSE HCS: NASHVILLE †	626	10		0.00%					
9	MEMPHIS	614	23	1	4.35%	9.0	12		0.00%	
9	MOUNTAIN HOME	621	16	2	12.50%	0.5	329	3	0.91%	266.0
10	CHILLICOTHE	538	37	4	10.81%	5.8	53		0.00%	
10	CINCINNATI	539	18		0.00%		79	8	10.13%	18.0
10	CLEVELAND	541	74	1	1.35%	1.0	130	7	5.38%	34.1
10	DAYTON	552	13		0.00%		106	14	13.21%	42.4
11	ALLEN PARK	553	15		0.00%					
11	ANN ARBOR HCS (Ann Arbor)	506	12		0.00%					
11	BATTLE CREEK	515	101	3	2.97%	25.3	73	25	34.25%	10.1
11	DANVILLE, IL	550	58		0.00%					
11	INDIANAPOLIS	583	0				18		0.00%	
11	NORTHERN INDIANA HCS †	610	121		0.00%					
11	SAGINAW	655								
12	CHICAGO HCS †	537	37	3	8.11%	12.7	17		0.00%	
12	HINES	578	12	1	8.33%	2.0	47		0.00%	
12	IRON MOUNTAIN	585	0				12	1	8.33%	145.0
12	MADISON	607	10		0.00%		13		0.00%	
12	MILWAUKEE	695	14		0.00%		296	7	2.36%	123.0
12	NORTH CHICAGO	556	121	1	0.83%	9.0	207	26	12.56%	18.2
12	TOMAH	676	65	1	1.54%	12.0	29	9	31.03%	29.4

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2000 Census

VISN	VAMC	STATION VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
13	BLACK HILLS HCS †	568	7		0.00%		138	2	1.45%	55.0
13	FARGO	437	6		0.00%					
13	MINNEAPOLIS	618	15	1	6.67%	10.0				
13	SIOUX FALLS	438	5		0.00%					
13	ST CLOUD	656	9	1	11.11%	1.0	116	10	8.62%	19.7
14	IOWA CITY	584	11		0.00%					
14	NEBRASKA/CENT-WEST IOWA †	636	44		0.00%		83	7	8.43%	33.1
15	COLUMBIA MO	543	7	2	28.57%	2.0				
15	EASTERN KANSAS HCS †	677	118	30	25.42%	41.3	189	4	2.12%	91.8
15	KANSAS CITY	589	27	4	14.81%	5.0	27		0.00%	
15	MARION IL	609	4		0.00%					
15	POPLAR BLUFF	647								
15	ST LOUIS	657	33	1	3.03%	1.0	40		0.00%	
15	WICHITA	452								
16	ALEXANDRIA	502	50	1	2.00%	82.0				
16	CENTRAL ARKANSAS VET. HCS (No.Little Rock)	598	54		0.00%		138	22	15.94%	8.5
16	FAYETTEVILLE AR	564	2	1	50.00%	6.0				
16	GULF COAST HCS (Biloxi)	520	61	1	1.64%	26.0	113	5	4.42%	119.6
16	HOUSTON	580	29		0.00%		2		0.00%	
16	JACKSON	586	16	1	6.25%	24.0	9		0.00%	
16	MUSKOGEE	623								
16	NEW ORLEANS	629	10		0.00%		5	5	100.00%	16.0
16	OKLAHOMA CITY	635	26	2	7.69%	8.0	11		0.00%	
16	SHREVEPORT	667	19		0.00%					
17	CENTRAL TEXAS VETERANS HCS †	674	217	21	9.68%	34.7	360	7	1.94%	167.7
17	NORTH TEXAS HCS †	549	38		0.00%		270	2	0.74%	16.0
17	SOUTH TEXAS VETERANS HCS †	671	41	7	17.07%	4.6				
18	AMARILLO	504								
18	NEW MEXICO HCS (Albuquerque)	501	15	1	6.67%	1.0	19		0.00%	
18	NORTHERN ARIZONA HCS (Prescott)	649					98	1	1.02%	2.0
18	PHOENIX	644	31		0.00%					
18	SOUTHERN ARIZONA HCS (tucson)	678	7		0.00%		15		0.00%	
18	WEST TEXAS HCS (Big Spring)	519	13	1	7.69%	1.0				
19	CHEYENNE	442								
19	DENVER	554	44	4	9.09%	10.8				
19	GRAND JUNCTION	575	3	1	33.33%	4.0				
19	MONTANA HCS †	436	1		0.00%					
19	SALT LAKE CITY	660	19		0.00%					
19	SHERIDAN	666	34		0.00%		14	5	35.71%	20.0

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2000 Census

VISN	VAMC	STATION VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
20	ALASKA HCS & RO (Anchorage)	463	0				67	10	14.93%	85.6
20	BOISE	531	7	4	57.14%	23.5	8		0.00%	
20	PORTLAND	648	16	1	6.25%	7.0	47		0.00%	
20	PUGET SOUND HCS †	663	50	11	22.00%	11.5	72	18	25.00%	28.6
20	ROSEBURG HCS (Roseburg)	653	21	10	47.62%	19.3	19		0.00%	
20	SPOKANE	668	6	2	33.33%	5.5				
20	WALLA WALLA	687	2		0.00%		17	1	5.88%	45.0
20	WHITE CITY	692					723	18	2.49%	207.0
21	CENTRAL CALIFORNIA HCS (Fresno)	570	9		0.00%					
21	HONOLULU	459	16		0.00%					
21	NORTHERN CALIFORNIA HCS †	612								
21	PALO ALTO HCS †	640	88	1	1.14%	4.0	157	36	22.93%	47.5
21	SAN FRANCISCO	662	9		0.00%		3		0.00%	
21	SIERRA NEVADA HCS (Reno)	654	9		0.00%					
22	GREATER LOS ANGELES HCS †	691	96	3	3.13%	16.3	288	37	12.85%	142.4
22	LOMA LINDA	605	9		0.00%					
22	LONG BEACH	600	12		0.00%		19		0.00%	
22	SAN DIEGO	664	35	1	2.86%	29.0				
22	SOUTHERN NEVADA HCS (Las Vegas)	593	4	1	25.00%	4.0				
ALL VA			4106	255	6.21%	17.7	6710	500	7.45%	62.9
AVERAGE			35	4	7.39%	11.3	92	12	9.08%	61.0
SD			39	6	11.44%	13.1	116	11	16.56%	56.3
CV			1.10	1.49	1.55	1.15	1.27	0.95	1.82	0.92

* Outlined values are 1 SD above the mean of all VAMCs and reflect long length of stay.

† Data are not comparable to previous reports due to consolidation.

Table 11. Comparison of all inpatient general psychiatry treatment and treatment for PTSD, by VISN, FY 2000.

VISN	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Tx. of PTSD				PTSD/Gen. Psych Ratio	
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans*	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	PTSD/Gen. Psych Ratio of Bed Days per ...*†	Episode Vet/Year
1	5,458	15.08	3,485	23.6	14.0%	16.0%	765	15.2	556	21.0	1.0	0.9
2	2,490	13.92	1,624	21.3	7.6%	9.5%	188	7.8	155	9.5	0.6	0.4
3	4,302	28.90	2,793	44.5	5.8%	7.3%	251	15.9	203	19.6	0.5	0.4
4	4,546	16.48	3,146	23.8	9.4%	10.5%	429	13.5	329	17.7	0.8	0.7
5	3,005	18.35	1,900	29.0	7.4%	9.3%	221	11.6	176	14.5	0.6	0.5
6	6,269	13.56	4,119	20.6	14.6%	15.7%	913	17.1	647	24.1	1.3	1.2
7	4,990	15.17	3,540	21.4	15.8%	16.6%	786	10.2	586	13.7	0.7	0.6
8	5,793	7.75	4,027	11.2	6.8%	7.8%	396	6.6	313	8.4	0.9	0.7
9	4,806	12.26	3,402	17.3	7.5%	8.2%	362	9.7	278	12.6	0.8	0.7
10	3,426	15.10	2,384	21.7	6.1%	8.0%	209	8.0	191	8.8	0.5	0.4
11	4,484	23.80	3,106	34.4	4.5%	5.2%	203	13.5	163	16.8	0.6	0.5
12	4,505	14.75	2,755	24.1	6.1%	7.5%	276	13.2	207	17.6	0.9	0.7
13	2,097	8.93	1,420	13.2	3.3%	4.8%	70	7.5	68	7.7	0.8	0.6
14	1,494	12.31	1,022	18.0	4.3%	4.3%	64	7.0	44	10.1	0.6	0.6
15	4,833	13.61	3,242	20.3	8.8%	10.3%	424	27.4	335	34.7	2.0	1.7
16	7,068	13.96	5,107	19.3	4.3%	5.4%	304	10.2	274	11.4	0.7	0.6
17	4,632	21.17	3,089	31.7	12.5%	14.5%	581	20.2	449	26.1	1.0	0.8
18	3,183	8.34	2,204	12.0	6.8%	8.7%	216	7.5	192	8.5	0.9	0.7
19	2,515	13.64	1,739	19.7	15.9%	18.4%	401	8.5	320	10.7	0.6	0.5
20	3,813	10.45	2,742	14.5	21.6%	25.5%	824	13.9	699	16.4	1.3	1.1
21	3,317	13.56	2,168	20.8	5.7%	7.5%	189	11.0	163	12.8	0.8	0.6
22	4,236	14.06	2,909	20.5	4.7%	5.8%	199	9.8	170	11.4	0.7	0.6
ALL VA	91,262	14.96	59,989	22.8	9.1%	10.7%	8271	13.4	6414	17.3	0.9	0.8
AVERAGE	4,086	14.8	2,815	22.0	8.8%	10.3%	376	12.1	296	15.2	0.8	0.7
SD	1,348	4.8	948	7.3	4.7%	5.2%	242	4.9	179	6.6	0.3	0.3
CV	0.33	0.32	0.34	0.33	0.54	0.50	0.64	0.40	0.60	0.43	0.39	0.41

*Bolded (underlined) values are 1 s.d. above the mean of all VISNs; outlined values are 1 s.d. below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 11-2. Comparison of all Domiciliary and PRRP treatment and treatment for PTSD, by VISN, FY 2000.

VISN	<u>All Domiciliary and PRRP Care</u>				<u>Percent Tx. for PTSD</u>		<u>Domiciliary and PRRP Tx. of PTSD</u>				<u>PTSD/Dom. and PRRP</u>	
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	Ratio of Bed Days per ...*†	Episode Vet/Year
1	782	80.6	642	98.1	9.1%	10.4%	71	90.6	67	96.0	1.1	1.0
2	2,097	51.6	1,473	73.5	11.7%	13.1%	246	16.5	193	21.0	0.3	0.3
3	2,025	60.3	1,609	75.9	22.6%	23.9%	457	42.9	385	51.0	0.7	0.7
4	3,204	39.3	2,783	45.2	9.5%	9.5%	303	40.4	263	46.6	1.0	1.0
5	1,048	98.2	990	104.0	16.9%	17.6%	177	124.2	174	126.3	1.3	1.2
6	1,665	48.9	1,529	53.2	1.6%	1.7%	26	65.5	26	65.5	1.3	1.2
7	648	85.7	601	92.5	8.2%	8.7%	53	75.1	52	76.5	0.9	0.8
8	997	65.8	870	75.4	17.8%	18.0%	177	74.9	157	84.4	1.1	1.1
9	1,008	83.9	938	90.1	1.0%	1.0%	10	120.7	9	134.1	1.4	1.5
10	2,933	41.5	2,540	48.0	6.1%	6.7%	179	60.3	169	63.9	1.5	1.3
11	1,017	36.0	871	42.0	37.8%	32.3%	384	25.7	281	35.1	0.7	0.8
12	2,914	65.5	2,509	76.1	13.8%	14.3%	402	38.3	360	42.8	0.6	0.6
13	1,490	61.7	1,353	68.0	2.7%	2.9%	40	53.1	39	54.5	0.9	0.8
14	779	35.1	586	46.7	11.0%	10.1%	86	28.2	59	41.1	0.8	0.9
15	1,303	66.4	1,162	74.5	3.5%	3.4%	45	44.0	39	50.8	0.7	0.7
16	2,322	46.2	2,029	52.8	17.6%	18.8%	408	30.7	382	32.8	0.7	0.6
17	1,988	85.9	1,562	109.3	1.5%	1.9%	30	100.3	29	103.7	1.2	0.9
18	821	53.7	767	57.5	1.9%	2.0%	16	86.3	15	92.0	1.6	1.6
19	106	44.9	103	46.2	67.0%	66.0%	71	42.3	68	44.2	0.9	1.0
20	2,462	97.7	2,221	108.3	9.4%	9.6%	231	54.2	214	58.5	0.6	0.5
21	1,214	58.1	1,019	69.3	26.4%	29.7%	320	58.5	303	61.8	1.0	0.9
22	1,142	93.4	1,097	97.2	8.0%	7.8%	91	151.2	86	160.0	1.6	1.6
ALL VA	33,965	62.1	28,556	73.9	11.3%	11.5%	3,823	50.2	3,295	58.3	0.8	0.8
AVERAGE	1,544	63.7	1,330	72.9	13.9%	14.1%	174	64.7	153	70.1	1.0	1.0
SD	819	20.0	697	21.6	14.6%	14.3%	144	34.4	125	35.0	0.4	0.3
CV	0.53	0.31	0.52	0.30	1.06	1.01	0.83	0.53	0.81	0.50	0.35	0.36

*Bolded (underlined) values are 1 s.d. above the mean of all VISNs; outlined values are 1 s.d. below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all domiciliary and PRRP treatment.

†† Includes general psychiatry inpatient episodes (from table 11) and domiciliary and PRRP episodes for veterans with PTSD.

Table 11a. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 1999, FY 2000, and FY 1999-2000 change.

	General Psychiatry Inpatient Care												Domiciliary and PRRP Care											
	FY 1999				FY 2000				Change				FY 1999				FY 2000				Change			
	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year
1	738	544	14.8	20.1	765	556	15.2	21.0	3.7%	2.2%	3.1%	4.5%	76	69	64.8	71.4	71	67	90.6	96.0	-6.6%	-2.9%	39.8%	34.5%
2	210	172	6.8	8.2	188	155	7.8	9.5	-10.5%	-9.9%	15.9%	15.1%	233	198	18.8	22.1	246	193	16.5	21.0	5.6%	-2.5%	-12.1%	-4.8%
3	329	268	28.4	34.9	251	203	15.9	19.6	-23.7%	-24.3%	-44.1%	-43.7%	284	259	46.7	51.3	457	385	42.9	51.0	60.9%	48.6%	-8.1%	-0.6%
4	445	355	12.2	15.3	429	329	13.5	17.7	-3.6%	-7.3%	10.9%	15.3%	328	321	45.0	46.0	303	263	40.4	46.6	-7.6%	-18.1%	-10.2%	1.2%
5	261	215	10.7	13.0	221	176	11.6	14.5	-15.3%	-18.1%	8.5%	12.2%	212	205	115.8	119.7	177	174	124.2	126.3	-16.5%	-15.1%	7.3%	5.5%
6	960	662	17.5	25.4	913	647	17.1	24.1	-4.9%	-2.3%	-2.7%	-5.3%	21	21	73.8	73.8	26	26	65.5	65.5	23.8%	23.8%	-11.3%	-11.3%
7	1,086	794	11.6	15.9	786	586	10.2	13.7	-27.6%	-26.2%	-12.3%	-13.9%	69	65	65.6	69.7	53	52	75.1	76.5	-23.2%	-20.0%	14.4%	9.8%
8	471	370	7.1	9.1	396	313	6.6	8.4	-15.9%	-15.4%	-7.1%	-7.7%	180	169	59.5	63.4	177	157	74.9	84.4	-1.7%	-7.1%	25.8%	33.2%
9	360	287	10.3	12.9	362	278	9.7	12.6	0.6%	-3.1%	-6.3%	-2.7%	10	10	74.7	74.7	10	9	120.7	134.1	0.0%	-10.0%	61.6%	79.5%
10	285	238	12.3	14.8	209	191	8.0	8.8	-26.7%	-19.7%	-34.8%	-40.4%	242	218	55.7	61.8	179	169	60.3	63.9	-26.0%	-22.5%	8.4%	3.4%
11	160	135	12.7	15.0	203	163	13.5	16.8	26.9%	20.7%	6.3%	11.7%	383	275	25.8	36.0	384	281	25.7	35.1	0.3%	2.2%	-0.6%	-2.5%
12	322	240	14.1	18.9	276	207	13.2	17.6	-14.3%	-13.8%	-6.3%	-6.9%	366	342	37.2	39.8	402	360	38.3	42.8	9.8%	5.3%	3.0%	7.5%
13	93	78	8.2	9.8	70	68	7.5	7.7	-24.7%	-12.8%	-9.0%	-21.4%	29	29	46.5	46.5	40	39	53.1	54.5	37.9%	34.5%	14.2%	17.1%
14	58	47	9.6	11.9	64	44	7.0	10.1	10.3%	-6.4%	-27.7%	-14.8%	51	46	38.7	42.9	86	59	28.2	41.1	68.6%	28.3%	-27.2%	-4.3%
15	457	371	26.6	32.8	424	335	27.4	34.7	-7.2%	-9.7%	2.8%	5.6%	54	40	34.8	46.9	45	39	44.0	50.8	-16.7%	-2.5%	26.7%	8.3%
16	488	424	13.0	14.9	304	274	10.2	11.4	-37.7%	-35.4%	-21.2%	-24.0%	376	356	29.1	30.7	408	382	30.7	32.8	8.5%	7.3%	5.6%	6.8%
17	610	453	19.2	25.8	581	449	20.2	26.1	-4.8%	-0.9%	5.3%	1.2%	57	53	88.2	94.8	30	29	100.3	103.7	-47.4%	-45.3%	13.7%	9.4%
18	254	204	8.0	10.0	216	192	7.5	8.5	-15.0%	-5.9%	-6.3%	-15.3%	7	7	51.1	51.1	16	15	86.3	92.0	128.6%	114.3%	68.6%	79.9%
19	409	338	7.6	9.2	401	320	8.5	10.7	-2.0%	-5.3%	12.8%	16.8%	203	191	38.8	41.2	71	68	42.3	44.2	-65.0%	-64.4%	9.1%	7.2%
20	762	632	13.9	16.8	824	699	13.9	16.4	8.1%	10.6%	-0.5%	-2.7%	262	257	60.6	61.7	231	214	54.2	58.5	-11.8%	-16.7%	-10.5%	-5.3%
21	202	175	10.5	12.1	189	163	11.0	12.8	-6.4%	-6.9%	5.2%	5.6%	437	364	53.8	64.6	320	303	58.5	61.8	-26.8%	-16.8%	8.8%	-4.3%
22	226	188	8.0	9.6	199	170	9.8	11.4	-11.9%	-9.6%	21.6%	18.5%	86	81	194.4	206.4	91	86	151.2	160.0	5.8%	6.2%	-22.2%	-22.5%
All VA	9,186	7,048	13.9	18.1	8271	6414	13.4	17.3	-10.0%	-9.0%	-3.6%	-4.5%	3,966	3,469	50.9	58.2	3,823	3,370	50.2	57.0	-3.6%	-2.9%	-1.3%	-2.1%
AVG.	418	327	12.9	16.2	376	296	12.1	15.2	-9.2%	-9.1%	-3.9%	-4.2%	180	163	60.0	64.4	174	153	64.7	70.1	4.6%	1.2%	9.3%	11.3%
S.D.	263	190	5.6	7.3	242	179	4.9	6.6	14.2%	11.8%	16.0%	17.1%	137	121	36.3	37.6	144	125	34.4	35.0	40.4%	34.7%	23.6%	24.9%
C.V.	0.63	0.58	0.44	0.45	0.64	0.60	0.40	0.43	-1.54	-1.31	-4.10	-4.08	0.76	0.75	0.61	0.58	0.83	0.81	0.53	0.50	8.84	28.74	2.54	2.21

Table 11b. Percent treated for PTSD in inpatient general psychiatry beds and domiciliary and PRRP beds by VISN: FY 1999, FY 2000 and FY 1999-2000 change.

VISN	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 1999		FY 2000		% Change: FY 1999-2000		FY 1999		FY 2000		% Change: FY 1999-2000	
	Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD	
	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans
1	11.1%	13.8%	14.0%	16.0%	26.1%	15.3%	5.7%	6.5%	9.1%	10.4%	60.3%	60.8%
2	8.9%	10.7%	7.6%	9.5%	-15.0%	-10.4%	11.1%	12.4%	11.7%	13.1%	5.8%	5.6%
3	7.5%	9.4%	5.8%	7.3%	-22.3%	-22.9%	13.5%	15.6%	22.6%	23.9%	66.8%	53.1%
4	8.3%	10.0%	9.4%	10.5%	13.5%	5.0%	9.9%	11.0%	9.5%	9.5%	-4.5%	-14.3%
5	8.7%	10.6%	7.4%	9.3%	-15.5%	-12.9%	18.8%	19.2%	16.9%	17.6%	-10.0%	-8.5%
6	15.3%	16.3%	14.6%	15.7%	-4.9%	-3.7%	1.2%	1.3%	1.6%	1.7%	35.6%	34.4%
7	18.4%	19.5%	15.8%	16.6%	-14.6%	-15.0%	7.1%	7.2%	8.2%	8.7%	15.2%	19.5%
8	7.7%	8.7%	6.8%	7.8%	-11.6%	-11.1%	16.9%	18.2%	17.8%	18.0%	5.2%	-0.6%
9	7.5%	8.6%	7.5%	8.2%	0.0%	-5.3%	0.8%	0.9%	1.0%	1.0%	21.2%	8.0%
10	8.3%	10.2%	6.1%	8.0%	-26.9%	-21.2%	7.7%	8.6%	6.1%	6.7%	-20.4%	-22.8%
11	3.5%	4.3%	4.5%	5.2%	28.6%	20.9%	37.0%	31.5%	37.8%	32.3%	1.9%	2.3%
12	6.6%	8.3%	6.1%	7.5%	-6.6%	-9.0%	13.5%	14.5%	13.8%	14.3%	2.2%	-1.4%
13	3.8%	4.6%	3.3%	4.8%	-13.0%	4.0%	2.1%	2.3%	2.7%	2.9%	28.7%	22.8%
14	4.2%	4.8%	4.3%	4.3%	1.5%	-10.1%	8.0%	8.2%	11.0%	10.1%	38.1%	22.4%
15	8.7%	10.7%	8.8%	10.3%	0.5%	-3.7%	3.1%	2.9%	3.5%	3.4%	11.5%	16.4%
16	6.8%	8.3%	4.3%	5.4%	-37.2%	-35.7%	12.9%	14.8%	17.6%	18.8%	36.1%	27.5%
17	13.4%	14.9%	12.5%	14.5%	-6.4%	-2.3%	2.5%	2.9%	1.5%	1.9%	-40.6%	-36.2%
18	8.1%	9.5%	6.8%	8.7%	-15.8%	-7.8%	0.8%	0.9%	1.9%	2.0%	142.8%	127.1%
19	15.8%	19.0%	15.9%	18.4%	0.9%	-3.1%	63.2%	67.0%	67.0%	66.0%	5.9%	-1.5%
20	20.7%	23.9%	21.6%	25.5%	4.6%	6.6%	10.1%	10.9%	9.4%	9.6%	-6.9%	-11.3%
21	6.1%	8.1%	5.7%	7.5%	-6.5%	-7.1%	30.0%	29.9%	26.4%	29.7%	-12.2%	-0.4%
22	5.0%	6.2%	4.7%	5.8%	-6.9%	-5.5%	7.9%	7.8%	8.0%	7.8%	0.4%	1.1%
ALL VA	9.6%	11.4%	9.1%	10.7%	-5.7%	-5.8%	10.7%	11.2%	11.3%	11.5%	5.7%	2.8%
AVERAGE	9.3%	10.9%	8.8%	10.3%	-5.8%	-6.1%	12.9%	13.4%	13.9%	14.1%	16.9%	13.3%
SD	4.5%	5.0%	4.7%	5.2%	14.7%	11.8%	14.1%	14.3%	14.6%	14.3%	36.2%	32.7%
CV	0.49	0.45	0.54	0.50	-2.55	-1.93	1.10	1.07	1.06	1.01	2.14	2.45

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2000. *

VISN	VAMC	CODE	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
			Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	of Bed Days per ...‡	
			of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
1	BEDFORD	518	1,072	12.7	788	17.3	0.7%	0.9%	7	5.9	7	5.9	0.5	0.3
1	BOSTON HCS †	523	1,752	14.0	1,077	22.8	6.2%	7.5%	108	10.0	81	13.3	0.7	0.6
1	CONNECTICUT HCS †	689	578	14.2	398	20.6	11.2%	10.8%	65	9.2	43	13.8	0.6	0.7
1	MANCHESTER	608	0		0	0.0								
1	NORTHAMPTON	631	828	27.2	620	36.4	57.2%	56.3%	474	19.0	349	25.8	0.7	0.7
1	PROVIDENCE	650	641	9.2	408	14.4	4.1%	5.6%	26	7.5	23	8.5	0.8	0.6
1	TOGUS	402	229	20.9	194	24.7	6.6%	7.2%	15	24.5	14	26.2	1.2	1.1
1	WHITE RIVER JCT	405	358	7.7	258	10.7	19.6%	20.2%	70	5.6	52	7.6	0.7	0.7
2	ALBANY	500	624	6.3	412	9.5	16.5%	20.4%	103	5.4	84	6.7	0.9	0.7
2	BATH	514	2	8.0	2	8.0	0.0%	0.0%					0.0	0.0
2	CANANDAIGUA	532	569	31.9	404	44.9	2.5%	2.7%	14	11.3	11	14.4	0.4	0.3
2	SYRACUSE	670	305	12.8	243	16.1	10.5%	11.5%	32	15.0	28	17.2	1.2	1.1
2	WESTERN NEW YORK HCS †	528	990	8.8	622	14.0	3.9%	5.3%	39	7.0	33	8.3	0.8	0.6
3	BRONX	526	561	17.9	418	24.0	3.4%	3.8%	19	19.0	16	22.6	1.1	0.9
3	HUDSON VALLEY HCS †	620	738	53.0	561	69.7	5.8%	6.1%	43	18.8	34	23.8	0.4	0.3
3	NEW JERSEY HCS †	561	990	27.0	672	39.7	6.5%	8.2%	64	14.4	55	16.7	0.5	0.4
3	NEW YORK HARBOR HCS †	630	1,510	15.1	992	23.0	5.9%	7.1%	89	14.5	70	18.4	1.0	0.8
3	NORTHPORT	632	503	51.1	371	69.3	7.2%	7.8%	36	16.8	29	20.9	0.3	0.3
4	ALTOONA	503	0		0	0.0								
4	BUTLER	529	0		0	0.0								
4	CLARKSBURG	540	248	17.8	194	22.7	49.2%	51.5%	122	24.5	100	30.0	1.4	1.3
4	COATESVILLE	542	754	21.8	608	27.0	8.1%	8.7%	61	13.5	53	15.5	0.6	0.6
4	ERIE	562	0		0	0.0								
4	LEBANON	595	421	12.8	306	17.6	4.0%	4.2%	17	11.4	13	14.8	0.9	0.8
4	PHILADELPHIA	642	1,268	8.9	899	12.6	5.9%	6.1%	75	9.2	55	12.6	1.0	1.0
4	PITTSBURGH HCS †	646	1,373	23.3	994	32.1	10.1%	10.5%	139	7.2	104	9.6	0.3	0.3
4	WILKES BARRE	693	482	11.3	337	16.2	3.1%	4.2%	15	7.2	14	7.7	0.6	0.5
4	WILMINGTON	460	0		0	0.0								
5	MARTINSBURG	613	597	11.5	386	17.7	16.6%	18.1%	99	11.4	70	16.1	1.0	0.9
5	MARYLAND HCS †	512	1,446	28.1	1,010	40.2	5.6%	7.1%	81	13.7	72	15.4	0.5	0.4
5	WASHINGTON	688	962	8.0	635	12.1	4.3%	5.8%	41	8.0	37	8.9	1.0	0.7
6	ASHEVILLE	637	404	7.2	307	9.5	23.8%	26.7%	96	7.4	82	8.7	1.0	0.9
6	BECKLEY	517	0		0	0.0								
6	DURHAM	558	833	8.2	612	11.2	9.7%	11.8%	81	6.9	72	7.8	0.8	0.7
6	FAYETTEVILLE NC	565	680	8.7	453	13.0	4.6%	5.7%	31	7.5	26	8.9	0.9	0.7
6	HAMPTON	590	1,555	10.6	855	19.3	16.1%	16.1%	250	13.6	138	24.6	1.3	1.3
6	RICHMOND	652	653	7.2	487	9.6	0.0%	0.0%					0.0	0.0
6	SALEM	658	1,042	20.8	738	29.4	29.3%	26.6%	305	14.8	196	23.0	0.7	0.8
6	SALISBURY	659	1,102	24.0	861	30.7	13.6%	16.3%	150	41.1	140	44.0	1.7	1.4

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2000. *

VISN	VAMC	CODE	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
			Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	of Bed Days per ...‡	
			of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
7	ATLANTA	508	1,133	9.2	804	13.0	14.2%	16.2%	161	8.0	130	9.9	0.9	0.8
7	AUGUSTA	509	910	18.6	677	25.0	25.1%	23.8%	228	11.2	161	15.8	0.6	0.6
7	BIRMINGHAM	521	0		0	0.0								
7	CENTRAL ALABAMA VETERANS HCS †	619	1,209	16.6	829	24.3	20.7%	21.7%	250	11.9	180	16.5	0.7	0.7
7	CHARLESTON	534	529	7.7	400	10.2	6.6%	7.5%	35	6.1	30	7.1	0.8	0.7
7	COLUMBIA SC	544	466	7.3	367	9.3	15.5%	16.9%	72	7.1	62	8.2	1.0	0.9
7	DUBLIN	557	95	8.9	89	9.5	6.3%	6.7%	6	8.2	6	8.2	0.9	0.9
7	TUSCALOOSA	679	648	30.7	531	37.4	5.2%	6.4%	34	12.7	34	12.7	0.4	0.3
8	BAY PINES	516	1,113	6.9	812	9.5	9.2%	11.2%	102	6.0	91	6.7	0.9	0.7
8	MIAMI	546	723	9.1	551	11.9	2.4%	2.9%	17	8.8	16	9.4	1.0	0.8
8	NO. FLORIDA/SO. GEORGIA VETERANS HS †	573	1,174	6.3	869	8.5	7.0%	7.6%	82	4.5	66	5.6	0.7	0.7
8	SAN JUAN	672	790	10.6	629	13.3	5.3%	5.6%	42	9.0	35	10.9	0.9	0.8
8	TAMPA	673	965	7.2	687	10.1	4.4%	5.2%	42	7.3	36	8.5	1.0	0.8
8	W PALM BEACH	548	1,028	7.7	602	13.1	10.8%	12.5%	111	7.2	75	10.7	0.9	0.8
9	HUNTINGTON	581	0		0	0.0								
9	LEXINGTON	596	573	7.6	490	8.8	4.2%	4.9%	24	5.5	24	5.5	0.7	0.6
9	LOUISVILLE	603	858	5.9	571	8.9	3.4%	4.7%	29	4.3	27	4.6	0.7	0.5
9	MEMPHIS	614	752	10.4	543	14.5	10.6%	8.8%	80	10.3	48	17.1	1.0	1.2
9	MIDDLE TENNESSE HCS: MURFREESBORO †	622	1,432	23.0	1,052	31.3	5.8%	6.2%	83	15.8	65	20.2	0.7	0.6
9	MIDDLE TENNESSE HCS: NASHVILLE †	626	494	7.2	406	8.7	7.5%	8.1%	37	8.8	33	9.8	1.2	1.1
9	MOUNTAIN HOME	621	697	7.4	506	10.2	15.6%	17.4%	109	7.2	88	8.9	1.0	0.9
10	CHILLICOTHE	538	1,061	13.9	713	20.7	4.9%	6.3%	52	10.0	45	11.6	0.7	0.6
10	CINCINNATI	539	566	10.5	457	13.0	15.7%	19.5%	89	7.2	89	7.2	0.7	0.6
10	CLEVELAND	541	1,214	22.3	892	30.4	2.8%	3.4%	34	8.8	30	9.9	0.4	0.3
10	DAYTON	552	585	6.7	438	9.0	5.8%	6.6%	34	6.4	29	7.5	0.9	0.8
11	ALLEN PARK	553	829	9.5	627	12.6	2.2%	2.4%	18	5.1	15	6.1	0.5	0.5
11	ANN ARBOR HCS (Ann Arbor)	506	518	10.6	395	13.9	4.6%	5.3%	24	6.0	21	6.9	0.6	0.5
11	BATTLE CREEK	515	1,725	22.4	1,196	32.4	6.0%	6.9%	103	15.3	83	19.0	0.7	0.6
11	DANVILLE, IL	550	475	18.0	351	24.4	3.4%	3.7%	16	10.1	13	12.5	0.6	0.5
11	INDIANAPOLIS	583	343	7.7	272	9.7	4.1%	4.0%	14	4.3	11	5.5	0.6	0.6
11	NORTHERN INDIANA HCS †	610	594	73.1	441	98.5	4.7%	6.1%	28	24.9	27	25.8	0.3	0.3
11	SAGINAW	655	0		0	0.0								
12	CHICAGO HCS †	537	1,411	13.3	886	21.2	8.2%	9.8%	115	15.3	87	20.3	1.1	1.0
12	HINES	578	968	9.6	677	13.7	4.9%	5.9%	47	8.6	40	10.1	0.9	0.7
12	IRON MOUNTAIN	585	0		0	0.0								
12	MADISON	607	422	12.9	288	18.9	6.4%	6.9%	27	11.2	20	15.1	0.9	0.8
12	MILWAUKEE	695	759	6.2	505	9.3	4.1%	5.3%	31	4.8	27	5.5	0.8	0.6
12	NORTH CHICAGO	556	704	29.0	522	39.1	5.3%	6.1%	37	19.2	32	22.2	0.7	0.6
12	TOMAH	676	241	32.4	193	40.4	7.9%	6.7%	19	17.1	13	25.0	0.5	0.6

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2000. *

VISN	VAMC	CODE	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
			Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	of Bed Days per ...‡	
			of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
13	BLACK HILLS HCS †	568	302	13.0	209	18.8	4.0%	5.7%	12	8.0	12	8.0	0.6	0.4
13	FARGO	437	193	13.0	154	16.4	2.1%	2.6%	4	13.5	4	13.5	1.0	0.8
13	MINNEAPOLIS	618	604	12.8	464	16.6	4.6%	6.0%	28	9.9	28	9.9	0.8	0.6
13	SIOUX FALLS	438	156	6.8	130	8.2	3.2%	3.8%	5	4.0	5	4.0	0.6	0.5
13	ST CLOUD	656	842	4.2	515	6.8	2.5%	3.9%	21	3.6	20	3.8	0.9	0.6
14	IOWA CITY	584	326	10.6	263	13.2	2.1%	2.3%	7	4.6	6	5.3	0.4	0.4
14	NEBRASKA/CENT-WESTERN IOWA HCS †	636	1,168	12.8	813	18.4	4.9%	4.8%	57	7.2	39	10.6	0.6	0.6
15	COLUMBIA MO	543	303	8.0	239	10.1	6.6%	8.4%	20	8.3	20	8.3	1.0	0.8
15	EASTERN KANSAS HCS †	677	1,634	24.4	1,123	35.4	14.7%	17.5%	241	42.7	196	52.5	1.8	1.5
15	KANSAS CITY	589	974	8.3	684	11.8	3.0%	3.8%	29	5.7	26	6.3	0.7	0.5
15	MARION IL	609	366	4.4	286	5.6	4.4%	4.5%	16	3.3	13	4.0	0.7	0.7
15	POPLAR BLUFF	647	0		0	0.0								
15	ST LOUIS	657	1,556	8.9	1,051	13.2	7.6%	7.9%	118	7.9	83	11.3	0.9	0.9
15	WICHITA	452	0		0	0.0								
16	ALEXANDRIA	502	382	42.2	304	53.0	2.4%	3.0%	9	55.2	9	55.2	1.3	1.0
16	FAYETTEVILLE AR	564	488	6.5	388	8.2	7.2%	6.7%	35	4.8	26	6.5	0.7	0.8
16	GULF COAST VETERANS HCS (Biloxi)	520	1,137	21.0	906	26.4	1.9%	2.2%	22	22.6	20	24.9	1.1	0.9
16	HOUSTON	580	1,119	11.6	849	15.3	5.7%	6.9%	64	7.6	59	8.3	0.7	0.5
16	JACKSON	586	500	13.6	391	17.3	4.2%	4.9%	21	9.1	19	10.1	0.7	0.6
16	CENTRAL ARKANSAS VET. HCS (No. Little Rock)	598	1,230	13.0	802	20.0	5.2%	7.4%	64	10.1	59	11.0	0.8	0.5
16	MUSKOGEE	623	0		0	0.0								
16	NEW ORLEANS	629	572	9.0	418	12.4	5.2%	6.9%	30	6.6	29	6.8	0.7	0.6
16	OKLAHOMA CITY	635	1,020	9.8	765	13.1	4.9%	5.9%	50	7.7	45	8.6	0.8	0.7
16	SHREVEPORT	667	620	7.3	449	10.0	1.5%	2.0%	9	4.0	9	4.0	0.6	0.4
17	CENTRAL TEXAS VETERANS HCS †	674	1,659	41.8	1,193	58.2	16.2%	18.9%	269	33.2	225	39.6	0.8	0.7
17	NORTH TEXAS HCS †	549	1,131	9.2	911	11.4	4.4%	5.2%	50	5.4	47	5.7	0.6	0.5
17	SOUTH TEXAS VETERANS HCS †	671	1,842	9.9	1,103	16.6	14.2%	17.0%	262	9.7	188	13.6	1.0	0.8
18	AMARILLO	504	0		0	0.0								
18	NEW MEXICO HCS (Albuquerque)	501	847	8.6	644	11.3	7.0%	8.7%	59	5.6	56	5.9	0.6	0.5
18	PHOENIX	644	1,629	8.0	1,051	12.4	7.0%	9.2%	114	8.5	97	10.0	1.1	0.8
18	NORTHERN ARIZONA HCS (Prescott)	649	0		0	0.0								
18	SOUTHERN ARIZONA HCS (Tucson)	678	482	6.3	366	8.3	4.6%	5.5%	22	5.0	20	5.5	0.8	0.7
18	WEST TEXAS HCS (Big Spring)	519	225	14.1	179	17.8	9.3%	10.6%	21	10.4	19	11.5	0.7	0.6
19	CHEYENNE	442	0		0	0.0								
19	DENVER	554	1,094	13.5	757	19.6	27.9%	32.0%	305	7.2	242	9.0	0.5	0.5
19	GRAND JUNCTION	575	239	9.4	174	12.9	8.4%	10.3%	20	9.9	18	10.9	1.1	0.9
19	MONTANA HCS †	436	174	6.2	133	8.1	4.6%	5.3%	8	5.8	7	6.6	0.9	0.8
19	SALT LAKE CITY	660	661	10.0	487	13.6	3.9%	4.3%	26	8.7	21	10.7	0.9	0.8
19	SHERIDAN	666	347	27.6	247	38.7	12.1%	15.0%	42	18.4	37	20.9	0.7	0.5

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2000. *

VISN	VAMC	CODE	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
			<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	All	Unique	<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	<i>of Bed Days per ...‡</i>	
			<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	Episodes	Veterans	<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	Episode	Vet/Year
20	ALASKA HCS & RO (Anchorage)	463	0		0	0.0								
20	BOISE	531	336	10.2	233	14.7	20.5%	24.0%	69	16.7	56	20.5	1.6	1.4
20	PORTLAND	648	734	8.6	586	10.7	3.8%	4.8%	28	6.8	28	6.8	0.8	0.6
20	PUGET SOUND HCS †	663	1,665	11.2	1,202	15.5	28.5%	34.1%	475	11.9	410	13.8	1.1	0.9
20	ROSEBURG HCS (Roseburg)	653	725	12.0	524	16.7	27.3%	32.4%	198	20.1	170	23.4	1.7	1.4
20	SPOKANE	668	230	8.7	182	11.0	15.7%	17.0%	36	9.2	31	10.7	1.1	1.0
20	WALLA WALLA	687	123	7.0	96	9.0	14.6%	17.7%	18	6.3	17	6.7	0.9	0.7
21	CENTRAL CALIFORNIA HCS (Fresno)	570	548	5.7	349	8.9	2.6%	3.7%	14	6.5	13	7.0	1.1	0.8
21	HONOLULU	459	451	9.2	217	19.2	7.3%	10.1%	33	9.8	22	14.7	1.1	0.8
21	NORTHERN CALIFORNIA HCS †	612	1	8.0	1	8.0	0.0%	0.0%					0.0	0.0
21	PALO ALTO HCS †	640	1,567	19.9	1,072	29.0	6.7%	9.0%	105	13.3	96	14.5	0.7	0.5
21	SAN FRANCISCO	662	252	13.2	210	15.9	7.5%	8.1%	19	9.0	17	10.1	0.7	0.6
21	SIERRA NEVADA HCS (Reno)	654	498	6.5	380	8.6	3.6%	4.5%	18	5.6	17	5.9	0.9	0.7
22	GREATER LOS ANGELES HCS †	691	1,640	21.0	1,167	29.5	4.9%	6.2%	81	14.3	72	16.1	0.7	0.5
22	LOMA LINDA	605	733	6.9	540	9.3	6.0%	7.4%	44	4.9	40	5.4	0.7	0.6
22	LONG BEACH	600	721	10.0	539	13.4	3.7%	3.7%	27	7.3	20	9.8	0.7	0.7
22	SAN DIEGO	664	744	13.5	483	20.7	3.6%	4.8%	27	9.1	23	10.7	0.7	0.5
22	SOUTHERN NEVADA HCS (Las Vegas)	593	398	7.2	328	8.7	5.0%	5.5%	20	6.5	18	7.2	0.9	0.8
ALL VA			91,262	15.0	59,989	22.8	9.1%	10.7%	8,271	13.4	6,414	17.3	0.9	0.8
AVERAGE			676	14.2	481	17.0	8.7%	9.8%	72	11.0	58	13.1	0.8	0.7
SD			483	10.6	329	14.7	8.6%	9.0%	85	7.9	65	9.0	0.3	0.3
CV			0.71	0.74	0.68	0.87	0.99	0.92	1.19	0.71	1.13	0.68	0.38	0.39

*Outlined values are greater than 1 s.d. from the mean in the undesirable direction.

† Data are not comparable to previous reports due to consolidation.

‡ Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2000.

VISN	VAMC	CODE	<u>All Domiciliary and PRRP Care</u>				<u>Percent Tx. for PTSD</u>		<u>Domiciliary and PRRP Tx. of PTSD</u>				<u>PTSD/Dom. and PRRP</u>	
			<u>Episodes</u>	<u>Bed Days/</u>	<u>Unique</u>	<u>Bed Days/</u>	<u>All</u>	<u>Unique</u>	<u>Episodes</u>	<u>Bed Days/</u>	<u>Unique</u>	<u>Bed Days/</u>	<u>Ratio of Bed Days per ...†</u>	<u>Vet/Year</u>
			<u>of Care</u>	<u>Episode</u>	<u>Veterans</u>	<u>Vet/Year</u>	<u>Episodes</u>	<u>Veterans</u>	<u>of Care</u>	<u>Episode</u>	<u>Veterans</u>	<u>Vet/Year</u>	<u>Episode</u>	<u>Vet/Year</u>
1 BEDFORD		518	241	109.0	198	132.6	3.3%	3.5%	8	103.5	7	118.3	0.9	0.9
1 BOSTON HCS †		523	468	63.1	399	74.0	6.4%	7.5%	30	92.0	30	92.0	1.5	1.2
1 CONNECTICUT HCS †		689	40	78.7	38	82.8	82.5%	84.2%	33	86.2	32	88.9	1.1	1.1
1 NORTHAMPTON		631	33	124.0	33	124.0	0.0%	0.0%					0.0	0.0
2 ALBANY		500	3	17.3	3	17.3	0.0%	0.0%					0.0	0.0
2 BATH		514	3	20.3	3	20.3	0.0%	0.0%					0.0	0.0
2 WESTERN NEW YORK HCS †		528	2091	51.7	1471	73.5	11.8%	13.1%	246	16.5	193	21.0	0.3	0.3
3 HUDSON VALLEY HCS †		620	744	56.6	612	68.8	32.1%	28.4%	239	45.0	174	61.8	0.8	0.9
3 NEW JERSEY HCS †		561	957	53.4	803	63.6	20.7%	24.2%	198	36.9	194	37.6	0.7	0.6
3 NEW YORK HARBOR HCS †		630	210	82.8	164	106.1	0.0%	0.0%					0.0	0.0
3 NORTHPORT		632	114	101.0	108	106.6	17.5%	17.6%	20	78.4	19	82.5	0.8	0.8
4 BUTLER		529	246	72.8	240	74.6	0.0%	0.0%					0.0	0.0
4 CLARKSBURG		540	138	19.9	136	20.2	0.7%	0.7%	1	21.0	1	21.0	1.1	1.0
4 COATESVILLE		542	1744	35.0	1507	40.5	17.1%	17.2%	299	40.4	259	46.7	1.2	1.2
4 LEBANON		595	355	42.2	347	43.2	0.0%	0.0%					0.0	0.0
4 PHILADELPHIA		642	1	5.0	1	5.0	0.0%	0.0%					0.0	0.0
4 PITTSBURGH HCS †		646	556	47.3	510	51.6	0.5%	0.6%	3	43.3	3	43.3	0.9	0.8
4 WILKES BARRE		693	164	18.0	162	18.2	0.0%	0.0%					0.0	0.0
5 MARTINSBURG		613	760	110.3	708	118.4	23.3%	24.6%	177	124.2	174	126.3	1.1	1.1
5 MARYLAND HCS †		512	288	66.2	286	66.7	0.0%	0.0%					0.0	0.0
6 ASHEVILLE		637	195	22.8	191	23.2	0.0%	0.0%					0.0	0.0
6 HAMPTON		590	928	65.2	821	73.7	2.8%	3.2%	26	65.5	26	65.5	1.0	0.9
6 SALEM		658	237	23.1	233	23.5	0.0%	0.0%					0.0	0.0
6 SALISBURY		659	305	35.9	302	36.2	0.0%	0.0%					0.0	0.0
7 ATLANTA		508	40	106.7	36	118.6	7.5%	8.3%	3	7.0	3	7.0	0.1	0.1
7 AUGUSTA		509	40	47.2	39	48.4	12.5%	12.8%	5	34.6	5	34.6	0.7	0.7
7 CENTRAL ALABAMA VETERANS HCS v		619	161	70.7	157	72.5	12.4%	12.7%	20	46.7	20	46.7	0.7	0.6
7 DUBLIN		557	407	93.4	377	100.9	6.1%	6.4%	25	114.0	24	118.8	1.2	1.2
8 BAY PINES		516	572	70.3	497	80.9	16.1%	17.1%	92	78.2	85	84.6	1.1	1.0
8 MIAMI		546	217	71.9	193	80.8	37.3%	36.3%	81	71.7	70	83.0	1.0	1.0
8 NO. FLORIDA/SO. GEORGIA VETERANS HS †		573	205	47.5	184	53.0	2.0%	2.2%	4	62.3	4	62.3	1.3	1.2
8 TAMPA		673	3	25.3	3	25.3	0.0%	0.0%					0.0	0.0
9 MEMPHIS		614	332	12.3	319	12.8	0.3%	0.3%	1	4.0	1	4.0	0.3	0.3

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2000.

VISN	VAMC	CODE	<u>All Domiciliary and PRRP Care</u>				<u>Percent Tx. for PTSD</u>		<u>Domiciliary and PRRP Tx. of PTSD</u>				<u>PTSD/Dom. and PRRP</u>	
			<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>All Episodes</i>	<i>Unique Veterans</i>	<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>Ratio of Bed Days per ...†</i>	<i>Episode Vet/Year</i>
9	MOUNTAIN HOME	621	676	119.0	620	129.8	1.3%	1.3%	9	133.7	8	150.4	1.1	1.2
10	CHILLICOTHE	538	331	44.5	308	47.9	1.5%	1.6%	5	25.8	5	25.8	0.6	0.5
10	CINCINNATI	539	611	47.3	525	55.0	11.8%	13.7%	72	40.2	72	40.2	0.8	0.7
10	CLEVELAND	541	1463	32.3	1260	37.5	3.5%	3.7%	51	78.7	46	87.3	2.4	2.3
10	DAYTON	552	528	58.7	490	63.3	9.7%	10.0%	51	73.7	49	76.7	1.3	1.2
11	BATTLE CREEK	515	1013	36.0	867	42.1	37.9%	32.4%	384	25.7	281	35.1	0.7	0.8
11	INDIANAPOLIS	583	4	29.3	4	29.3	0.0%	0.0%					0.0	0.0
12	CHICAGO HCS †	537	214	31.1	205	32.5	0.0%	0.0%					0.0	0.0
12	HINES	578	544	32.6	514	34.5	3.5%	3.5%	19	28.1	18	29.6	0.9	0.9
12	IRON MOUNTAIN	585	123	26.7	121	27.1	0.8%	0.8%	1	93.0	1	93.0	3.5	3.4
12	MADISON	607	31	125.5	31	125.5	0.0%	0.0%					0.0	0.0
12	MILWAUKEE	695	543	142.2	532	145.2	1.8%	1.9%	10	146.4	10	146.4	1.0	1.0
12	NORTH CHICAGO	556	1171	62.9	977	75.3	24.4%	26.0%	286	34.2	254	38.5	0.5	0.5
12	TOMAH	676	288	29.7	263	32.6	29.9%	31.6%	86	41.1	83	42.6	1.4	1.3
13	BLACK HILLS HCS †	568	516	87.5	430	105.0	0.4%	0.5%	2	62.0	2	62.0	0.7	0.6
13	ST CLOUD	656	974	48.1	928	50.5	3.9%	4.0%	38	52.7	37	54.1	1.1	1.1
14	NEBRASKA/CENT-WESTERN IOWA HCS †	636	779	35.1	586	46.7	11.0%	10.1%	86	28.2	59	41.1	0.8	0.9
15	EASTERN KANSAS HCS †	677	663	92.7	629	97.7	2.9%	2.7%	19	88.8	17	99.3	1.0	1.0
15	KANSAS CITY	589	395	25.1	332	29.9	5.6%	5.4%	22	12.6	18	15.4	0.5	0.5
15	MARION IL	609	131	4.8	118	5.3	3.1%	3.4%	4	4.0	4	4.0	0.8	0.8
15	ST LOUIS	657	114	127.3	113	128.5	0.0%	0.0%					0.0	0.0

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2000.

VISN	VAMC	CODE	<u>All Domiciliary and PRRP Care</u>				<u>Percent Tx. for PTSD</u>		<u>Domiciliary and PRRP Tx. of PTSD</u>				<u>PTSD/Dom. and PRRP</u>	
			<u>Episodes</u> <u>of Care</u>	<u>Bed Days/</u> <u>Episode</u>	<u>Unique</u> <u>Veterans</u>	<u>Bed Days/</u> <u>Vet/Year</u>	<u>All</u> <u>Episodes</u>	<u>Unique</u> <u>Veterans</u>	<u>Episodes</u> <u>of Care</u>	<u>Bed Days/</u> <u>Episode</u>	<u>Unique</u> <u>Veterans</u>	<u>Bed Days/</u> <u>Vet/Year</u>	<u>Ratio of Bed Days per ...†</u>	
16	ALEXANDRIA	502	8	26.1	8	26.1	0.0%	0.0%					0.0	0.0
16	CENTRAL ARKANSAS VET. HCS (No.Little Rock)	598	798	47.9	733	52.2	30.2%	32.9%	241	28.9	241	28.9	0.6	0.6
16	GULF COAST HCS (Biloxi)	520	1009	52.0	840	62.5	1.4%	1.4%	14	105.7	12	123.3	2.0	2.0
16	HOUSTON	580	22	64.7	22	64.7	9.1%	9.1%	2	12.0	2	12.0	0.2	0.2
16	JACKSON	586	356	21.6	333	23.1	19.4%	18.9%	69	20.4	63	22.3	0.9	1.0
16	NEW ORLEANS	629	99	33.1	85	38.5	82.8%	80.0%	82	32.3	68	39.0	1.0	1.0
16	OKLAHOMA CITY	635	29	133.0	26	148.4	0.0%	0.0%					0.0	0.0
16	SHREVEPORT	667	1	28.0	1	28.0	0.0%	0.0%					0.0	0.0
17	CENTRAL TEXAS VETERANS HCS †	674	793	114.2	765	118.4	2.4%	2.5%	19	134.2	19	134.2	1.2	1.1
17	NORTH TEXAS HCS †	549	1195	67.0	834	96.1	0.9%	1.3%	11	41.7	11	41.7	0.6	0.4
18	NEW MEXICO HCS (Albuquerque)	501	142	38.5	136	40.2	0.0%	0.0%					0.0	0.0
18	NORTHERN ARIZONA HCS (Prescott)	649	439	76.6	403	83.5	3.6%	3.7%	16	86.3	15	92.0	1.1	1.1
18	SOUTHERN ARIZONA HCS (Tucson)	678	240	20.7	232	21.4	0.0%	0.0%					0.0	0.0
19	SHERIDAN	666	106	44.9	103	46.2	67.0%	66.0%	71	42.3	68	44.2	0.9	1.0
20	ALASKA HCS & RO (Anchorage)	463	168	143.4	139	173.4	11.9%	12.2%	20	126.8	17	149.1	0.9	0.9
20	BOISE	531	168	16.9	157	18.1	0.0%	0.0%					0.0	0.0
20	PORTLAND	648	169	106.0	163	109.9	2.4%	2.5%	4	55.0	4	55.0	0.5	0.5
20	PUGET SOUNDS HCS †	663	536	48.5	505	51.5	32.5%	33.1%	174	39.0	167	40.7	0.8	0.8
20	ROSEBURG HCS (Roseburg)	653	106	26.8	104	27.3	0.0%	0.0%					0.0	0.0
20	WALLA WALLA	687	274	22.4	258	23.7	2.6%	2.3%	7	16.1	6	18.8	0.7	0.8
20	WHITE CITY	692	1041	154.5	967	166.3	2.5%	2.7%	26	110.0	26	110.0	0.7	0.7
21	CENTRAL CALIFORNIA HCS (Fresno)	570	35	23.9	34	24.6	0.0%	0.0%					0.0	0.0
21	HONOLULU	459	68	61.9	65	64.7	95.6%	95.4%	65	62.7	62	65.7	1.0	1.0
21	PALO ALTO HCS †	640	1085	57.3	896	69.4	23.4%	26.8%	254	57.6	240	61.0	1.0	0.9
21	SAN FRANCISCO	662	26	129.1	25	134.3	3.8%	4.0%	1	27.0	1	27.0	0.2	0.2

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2000.

VISN	VAMC	CODE	<u>All Domiciliary and PRRP Care</u>				<u>Percent Tx. for PTSD</u>		<u>Domiciliary and PRRP Tx. of PTSD</u>				<u>PTSD/Dom. and PRRP</u>	
			<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>All Episodes</i>	<i>Unique Veterans</i>	<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>Ratio of Bed Days per ...</i>	<i>†</i>
	22 GREATER LOS ANGELES HCS †	691	723	137.8	702	141.9	12.6%	12.3%	91	151.2	86	160.0	1.1	1.1
	22 LONG BEACH	600	419	16.7	411	17.0	0.0%	0.0%					0.0	0.0
	ALL VA		33965	62.1	28556	73.9	11.3%	11.5%	3823	50.2	3295	58.3	0.8	0.8
	AVERAGE		419	59.5	369	65.1	10.7%	10.9%	70	59.8	62	63.9	0.6	0.6
	SD		422	38.1	347	41.5	19.1%	19.0%	93	38.8	79	41.2	0.6	0.6
	CV		1.01	0.64	0.94	0.64	1.78	1.75	1.33	0.65	1.28	0.65	0.96	0.96

† Data are not comparable to previous reports due to consolidation.

‡ Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Data for TABLE 13 are not available for this fiscal year.

Table 14. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000).*

<i>VISN</i>	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Average Length Of Stay (Index stay)</i>	<i>Bed Days 6 months After DC</i>	<i>Number of Admissions 6 months After D/C</i>	<i>% Readm. within 14 d days</i>	<i>% Readm. within 30 days</i>	<i>% Readm. within 180 days</i>	<i>Days to Readm. First Year After D/C</i>	<i>Inpatient Summary Score Average Z: Weighted</i>
1	310	15.5	9.8	0.52	4.8%	6.1%	38.7%	93.4	0.32
2	89	7.6	4.6	0.53	6.7%	13.5%	31.5%	66.5	0.25
3	98	17.7	7.5	0.48	7.1%	10.2%	27.6%	69.7	0.59
4	153	14.2	6.6	0.56	5.9%	9.2%	35.9%	75.3	0.44
5	91	11.1	7.5	0.70	6.6%	16.5%	36.3%	57.5	1.13
6	339	16.2	9.9	0.55	3.2%	6.5%	37.2%	69.0	0.77
7	319	10.0	5.7	0.50	5.0%	10.0%	34.2%	72.4	0.19
8	163	6.5	3.1	0.45	5.5%	7.4%	27.6%	76.1	-0.39
9	139	10.3	4.5	0.42	4.3%	6.5%	28.8%	82.3	-0.34
10	99	7.8	2.2	0.24	3.0%	5.1%	18.2%	76.4	-0.94
11	90	13.9	7.6	0.66	7.8%	11.1%	35.6%	67.2	0.90
12	112	13.3	6.9	0.56	6.3%	10.7%	35.7%	74.6	0.50
13	39	6.5	0.6	0.18	0.0%	2.6%	15.4%	94.3	-1.69
14	20	4.9	3.0	0.40	10.0%	15.0%	25.0%	56.0	0.09
15	172	33.4	4.7	0.40	4.1%	7.0%	25.0%	62.5	0.71
16	132	11.9	2.6	0.25	3.0%	3.8%	19.7%	69.0	-0.64
17	235	21.9	5.7	0.44	3.8%	6.8%	31.5%	91.1	0.02
18	95	8.0	2.2	0.26	2.1%	5.3%	18.9%	93.4	-1.23
19	165	9.0	3.9	0.37	6.1%	9.7%	25.5%	63.0	-0.08
20	359	14.3	2.9	0.27	4.5%	5.6%	20.9%	72.0	-0.47
21	74	12.6	4.6	0.51	1.4%	4.1%	21.6%	73.6	-0.18
22	83	13.1	3.4	0.37	3.6%	8.4%	26.5%	60.1	-0.02
ALL VA	3,376	14.0	5.6	0.45	5.0%	8.0%	30.0%	74.8	0.08
AVERAGE	153	12.7	5.0	0.44	4.8%	8.2%	28.1%	73.5	0.00
SD	98	6.2	2.4	0.13	2.2%	3.5%	6.9%	11.2	0.70
CV	0.64	0.5	0.5	0.31	0.46	0.43	0.24	0.15	

* Outlined values are 1 standard deviation from the mean and reflect high levels of inpatient service use.

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000), by VAMC. †*

<i>VISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Average Length Of Stay (Index stay)</i>	<i>Bed Days 6 months After DC</i>	<i>Number of Admissions 6 months After D/C</i>	<i>% Readm. within 14 d ays</i>	<i>% Readm. within 30 days</i>	<i>% Readm. within 180 days</i>	<i>Days to Readm. First Year After D/C</i>
1	BEDFORD	518	2	5.5	0.0	0.0	0.0%	0.0%	0.0%	NA
1	BOSTON HCS †	523	43	10.6	7.6	1.0	23.3%	23.3%	41.9%	43.9
1	CONNECTICUT HCS †	689	20	9.6	6.1	0.6	0.0%	0.0%	40.0%	108.5
1	NORTHAMPTON	631	200	17.9	12.2	0.4	1.5%	3.0%	39.0%	107.4
1	PROVIDENCE	650	11	7.9	3.6	0.6	0.0%	0.0%	45.5%	89.0
1	TOGUS	402	10	33.1	0.4	0.2	10.0%	10.0%	20.0%	43.5
1	WHITE RIVER JCT	405	24	6.9	4.4	0.8	4.2%	8.3%	37.5%	70.9
2	ALBANY	500	51	5.3	3.0	0.6	3.9%	11.8%	33.3%	76.5
2	CANANDAIGUA	532	6	11.3	5.5	0.7	16.7%	16.7%	50.0%	48.0
2	SYRACUSE	670	14	17.1	10.7	0.4	14.3%	21.4%	35.7%	59.0
2	WESTERN NEW YORK HCS †	528	18	5.4	3.9	0.5	5.6%	11.1%	16.7%	41.3
3	BRONX	526	6	24.2	1.8	0.2	0.0%	16.7%	16.7%	16.0
3	HUDSON VALLEY HCS †	620	14	26.1	12.1	0.6	7.1%	7.1%	35.7%	76.4
3	NEW JERSEY HCS †	561	28	14.1	9.2	0.5	14.3%	17.9%	28.6%	54.3
3	NEW YORK HARBOR HCS †	630	36	15.1	5.8	0.4	5.6%	8.3%	25.0%	73.9
3	NORTHPORT	632	14	20.4	6.0	0.6	0.0%	0.0%	28.6%	96.3
4	CLARKSBURG	540	49	25.4	6.9	0.4	8.2%	10.2%	30.6%	73.9
4	COATESVILLE	542	24	12.8	9.7	0.7	4.2%	4.2%	37.5%	78.9
4	LEBANON	595	5	11.0	6.0	0.8	0.0%	0.0%	60.0%	91.7
4	PHILADELPHIA	642	27	9.7	7.7	0.7	11.1%	14.8%	40.7%	73.1
4	PITTSBURGH HCS †	646	45	6.2	4.3	0.5	2.2%	8.9%	37.8%	73.1
4	WILKES BARRE	693	3	8.0	0.0	0.0	0.0%	0.0%	0.0%	NA
5	MARTINSBURG	613	44	11.2	8.6	0.8	9.1%	18.2%	40.9%	58.6
5	MARYLAND HCS †	512	29	13.0	6.8	0.4	0.0%	17.2%	27.6%	56.8
5	WASHINGTON	688	18	7.9	6.1	0.9	11.1%	11.1%	38.9%	55.4
6	ASHEVILLE	637	33	6.7	0.9	0.1	3.0%	3.0%	12.1%	80.0
6	DURHAM	558	34	7.7	1.8	0.3	0.0%	8.8%	20.6%	54.1
6	FAYETTEVILLE NC	565	14	7.9	2.9	0.4	0.0%	0.0%	35.7%	109.4
6	HAMPTON	590	76	13.5	13.6	1.0	7.9%	10.5%	46.1%	65.5
6	SALEM	658	126	10.8	16.5	0.6	0.8%	5.6%	55.6%	72.2
6	SALISBURY	659	56	44.8	1.9	0.3	5.4%	5.4%	8.9%	20.6
7	ATLANTA	508	69	7.7	3.6	0.4	7.2%	11.6%	29.0%	45.6
7	AUGUSTA	509	86	11.3	6.3	0.5	2.3%	8.1%	36.0%	85.5
7	CENTRAL ALABAMA VETERANS HCS †	619	96	12.1	7.2	0.6	6.3%	13.5%	39.6%	64.5
7	CHARLESTON	534	17	6.5	1.8	0.4	5.9%	11.8%	23.5%	60.5
7	COLUMBIA SC	544	35	6.9	6.6	0.4	2.9%	2.9%	31.4%	105.8
7	DUBLIN	557	5	8.2	14.6	0.6	0.0%	0.0%	60.0%	113.0
7	TUSCALOOSA	679	11	13.1	1.8	0.4	9.1%	9.1%	18.2%	67.5

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000), by VAMC. †*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 d ays	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
8	BAY PINES	516	50	6.5	2.3	0.2	2.0%	4.0%	18.0%	91.6
8	MIAMI	546	11	7.7	3.8	0.3	18.2%	18.2%	18.2%	13.5
8	NO. FLORIDA/SO. GEORGIA VETERANS HS †	573	36	4.9	3.2	0.8	11.1%	13.9%	41.7%	63.3
8	SAN JUAN	672	16	10.1	3.4	0.4	6.3%	6.3%	37.5%	110.7
8	TAMPA	673	17	6.6	2.1	0.3	0.0%	0.0%	23.5%	79.0
8	W PALM BEACH	548	33	5.9	4.5	0.6	3.0%	6.1%	27.3%	71.3
9	LEXINGTON	596	10	4.3	5.8	0.3	0.0%	0.0%	20.0%	110.5
9	LOUISVILLE	603	10	4.9	0.4	0.2	0.0%	0.0%	20.0%	98.0
9	MEMPHIS	614	27	11.4	7.0	0.8	7.4%	11.1%	44.4%	90.7
9	MIDDLE TENNESSEE HCS: MURFREESBORO †	622	30	17.7	6.6	0.6	3.3%	6.7%	36.7%	77.5
9	MIDDLE TENNESSEE HCS: NASHVILLE †	626	14	9.3	7.4	0.5	7.1%	7.1%	28.6%	41.3
9	MOUNTAIN HOME	621	48	7.6	1.5	0.2	4.2%	6.3%	18.8%	85.6
10	CHILLICOTHE	538	20	10.3	4.7	0.5	10.0%	15.0%	30.0%	67.2
10	CINCINNATI	539	54	6.8	0.4	0.1	0.0%	0.0%	7.4%	96.8
10	CLEVELAND	541	12	10.8	7.5	0.5	0.0%	8.3%	33.3%	82.8
10	DAYTON	552	13	5.8	1.5	0.3	7.7%	7.7%	30.8%	63.8
11	ALLEN PARK	553	8	5.3	1.4	0.4	0.0%	12.5%	25.0%	61.0
11	ANN ARBOR HCS (Ann Arbor)	506	6	7.3	10.3	1.2	16.7%	16.7%	66.7%	101.3
11	BATTLE CREEK	515	45	14.1	11.8	0.9	11.1%	13.3%	44.4%	63.0
11	DANVILLE, IL	550	9	12.3	1.6	0.2	0.0%	0.0%	22.2%	98.0
11	INDIANAPOLIS	583	6	3.2	10.2	0.8	16.7%	33.3%	50.0%	28.7
11	NORTHERN INDIANA HCS †	610	16	25.0	0.5	0.1	0.0%	0.0%	6.3%	83.0
12	CHICAGO HCS †	537	47	15.7	8.5	0.6	6.4%	8.5%	38.3%	67.1
12	HINES	578	22	9.9	8.1	0.7	4.5%	4.5%	40.9%	104.1
12	MADISON	607	9	4.7	4.8	0.3	0.0%	0.0%	22.2%	115.0
12	MILWAUKEE	695	12	6.0	1.1	0.3	0.0%	8.3%	25.0%	103.7
12	NORTH CHICAGO	556	17	19.6	5.8	0.6	11.8%	23.5%	35.3%	43.5
12	TOMAH	676	5	17.6	7.0	0.6	20.0%	40.0%	40.0%	18.5
13	BLACK HILLS HCS †	568	6	6.3	0.0	0.0	0.0%	0.0%	0.0%	NA
13	FARGO	437	2	22.5	1.0	0.5	0.0%	0.0%	50.0%	132.0
13	MINNEAPOLIS	618	17	6.7	0.2	0.1	0.0%	0.0%	5.9%	150.0
13	SIOUX FALLS	438	3	4.0	0.0	0.0	0.0%	0.0%	0.0%	NA
13	ST CLOUD	656	11	4.1	1.6	0.5	0.0%	9.1%	36.4%	71.0
14	IOWA CITY	584	3	3.7	3.3	0.7	33.3%	33.3%	33.3%	9.0
14	NEBRASKA-WESTERN IOWA HCS †	636	17	5.1	2.9	0.4	5.9%	11.8%	23.5%	67.8
15	COLUMBIA MO	543	9	9.0	0.0	0.0	0.0%	0.0%	0.0%	NA
15	EASTERN KANSAS HCS †	677	101	52.2	5.0	0.3	5.9%	6.9%	19.8%	63.3
15	KANSAS CITY	589	14	4.4	3.9	0.5	7.1%	14.3%	28.6%	49.3
15	MARION IL	609	6	2.8	0.3	0.2	0.0%	0.0%	16.7%	56.0
15	ST LOUIS	657	42	7.8	5.8	0.7	0.0%	7.1%	42.9%	64.9

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000), by VAMC. †*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 d ays	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
16	ALEXANDRIA	502	8	58.1	0.0	0.0	0.0%	0.0%	0.0%	NA
16	CENTRAL ARKANSAS VET. HCS (No. Little Rock)	598	26	9.4	2.5	0.3	7.7%	7.7%	23.1%	65.3
16	FAYETTEVILLE AR	564	17	4.9	1.6	0.4	0.0%	0.0%	23.5%	58.8
16	GULF COAST HCS (Biloxi)	520	9	20.7	6.6	0.7	0.0%	0.0%	44.4%	93.0
16	HOUSTON	580	22	7.6	1.6	0.1	0.0%	0.0%	4.5%	61.0
16	JACKSON	586	11	10.2	2.0	0.3	0.0%	9.1%	27.3%	46.3
16	NEW ORLEANS	629	11	6.9	1.5	0.2	9.1%	9.1%	18.2%	43.0
16	OKLAHOMA CITY	635	25	8.9	2.2	0.2	4.0%	4.0%	20.0%	90.4
16	SHREVEPORT	667	3	2.3	22.7	0.3	0.0%	0.0%	33.3%	58.0
17	CENTRAL TEXAS VETERANS HCS †	674	118	34.9	4.9	0.3	1.7%	5.1%	25.4%	96.0
17	NORTH TEXAS HCS †	549	23	5.6	1.7	0.2	4.3%	4.3%	13.0%	48.0
17	SOUTH TEXAS VETERANS HCS †	671	94	9.6	7.7	0.7	6.4%	9.6%	43.6%	90.6
18	NEW MEXICO HCS (Albuquerque)	501	34	4.4	0.4	0.1	0.0%	0.0%	11.8%	127.3
18	PHOENIX	644	54	10.4	3.2	0.4	3.7%	7.4%	24.1%	89.0
18	SOUTHERN ARIZONA HCS (Tucson)	678	4	4.3	4.8	0.3	0.0%	25.0%	25.0%	16.0
18	WEST TEXAS HCS (Big Spring)	519	3	11.0	0.0	0.0	0.0%	0.0%	0.0%	NA
19	DENVER	554	127	7.3	2.9	0.3	3.9%	7.1%	22.8%	73.2
19	GRAND JUNCTION	575	5	11.2	17.4	0.6	0.0%	40.0%	40.0%	20.5
19	MONTANA HCS †	436	3	5.0	0.0	0.0	0.0%	0.0%	0.0%	NA
19	SALT LAKE CITY	660	12	5.6	9.3	0.8	8.3%	8.3%	41.7%	66.8
19	SHERIDAN	666	18	23.2	4.4	0.5	22.2%	22.2%	33.3%	24.3
20	BOISE	531	25	18.2	3.6	0.5	4.0%	4.0%	28.0%	87.7
20	PORTLAND	648	15	6.9	3.3	0.3	0.0%	0.0%	20.0%	90.3
20	PUGET SOUND HCS †	663	216	12.1	2.4	0.2	5.1%	6.5%	19.0%	63.0
20	ROSEBURG HCS (Roseburg)	653	78	22.1	3.8	0.3	2.6%	3.8%	23.1%	85.2
20	SPOKANE	668	17	10.1	1.5	0.2	5.9%	5.9%	17.6%	79.0
20	WALLA WALLA	687	8	5.5	6.3	0.4	12.5%	12.5%	37.5%	53.7
21	CENTRAL CALIFORNIA HCS (Fresno)	570	8	9.5	4.0	0.4	0.0%	0.0%	37.5%	95.3
21	HONOLULU	459	11	15.2	9.8	1.8	9.1%	18.2%	36.4%	34.0
21	PALO ALTO HCS †	640	46	13.2	3.7	0.2	0.0%	2.2%	13.0%	91.0
21	SAN FRANCISCO	662	5	11.0	5.6	0.6	0.0%	0.0%	40.0%	41.5
21	SIERRA NEVADA HCS (Reno)	654	4	6.3	0.5	0.3	0.0%	0.0%	25.0%	126.0

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000), by VAMC. †*

<i>VISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Average Length Of Stay (Index stay)</i>	<i>Bed Days 6 months After DC</i>	<i>Number of Admissions 6 months After D/C</i>	<i>% Readm. within 14 d ays</i>	<i>% Readm. within 30 days</i>	<i>% Readm. within 180 days</i>	<i>Days to Readm. First Year After D/C</i>
22	GREATER LOS ANGELES HCS †	691	32	23.2	3.8	0.3	3.1%	6.3%	18.8%	77.5
22	LOMA LINDA	605	20	5.3	0.7	0.2	0.0%	0.0%	15.0%	57.3
22	LONG BEACH	600	11	5.8	4.2	0.6	9.1%	9.1%	45.5%	70.2
22	SAN DIEGO	664	10	9.1	2.8	0.5	0.0%	20.0%	30.0%	24.3
22	SOUTHERN NEVADA HCS (Las Vegas)	593	10	8.6	7.3	0.8	10.0%	20.0%	50.0%	52.4
ALL VA			3376	14.0	5.6	0.5	5.0%	8.0%	30.0%	73.9
AVG.			29	11.6	4.7	0.4	4.8%	8.3%	28.4%	71.03
SD			36	9.1	4.1	0.3	6.0%	8.5%	14.3%	27.60
CV			1.21	0.8	0.9	0.6	1.25	1.03	0.50	0.39

NA = Not Applicable.

* Outlined values are 1 standard deviation from the mean and reflect high levels of inpatient service use.

† Data not comparable to previous reports due to consolidation.

Table 16. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000).*

VISN	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w anyVisits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: Psychiatric & SA Disorders	Any SA Outpatient Visit in 30 Days After DC	Number of SA OP Visits Among those w anyVisits	Outpatient Summary Score Average Z: Weighted
1	90.0%	72.9%	19.9	19.0	2.48	40.3%	14.2%	15.8	-0.34
2	89.9%	78.7%	15.5	24.8	2.49	50.6%	39.3%	23.0	0.41
3	91.8%	78.6%	20.3	29.6	2.56	73.5%	18.4%	26.1	0.54
4	88.2%	66.0%	26.4	15.4	2.41	45.8%	17.0%	14.3	-0.67
5	93.4%	74.7%	22.2	18.4	2.54	67.0%	19.8%	33.5	0.47
6	89.1%	61.9%	32.1	13.4	2.48	31.9%	4.4%	16.4	-0.99
7	92.5%	71.5%	23.0	18.9	2.42	47.3%	13.5%	14.2	-0.38
8	94.5%	77.3%	20.2	13.3	2.59	44.8%	23.9%	11.8	-0.05
9	94.2%	74.1%	25.7	10.1	2.50	27.3%	8.6%	24.9	-0.38
10	98.0%	81.8%	19.5	35.1	2.65	52.5%	14.1%	26.0	0.68
11	91.1%	73.3%	21.4	18.3	2.43	48.9%	7.8%	11.8	-0.46
12	92.0%	64.3%	28.8	28.2	2.46	62.5%	27.7%	50.9	0.58
13	97.4%	87.2%	13.4	54.6	2.69	61.5%	46.2%	33.7	1.69
14	100.0%	90.0%	16.8	35.6	2.90	35.0%	5.0%	7.2	0.50
15	97.7%	77.3%	22.5	20.5	2.63	47.7%	13.4%	32.4	0.46
16	95.5%	76.5%	22.7	22.6	2.55	43.9%	15.2%	8.1	-0.19
17	91.5%	64.7%	30.5	8.5	2.49	25.1%	8.5%	18.7	-0.87
18	93.7%	77.9%	16.8	13.3	2.56	40.0%	8.4%	13.1	-0.21
19	96.4%	86.1%	12.8	30.1	2.61	37.6%	13.9%	32.4	0.74
20	89.0%	66.3%	29.5	14.4	2.39	47.9%	14.9%	13.3	-0.76
21	91.9%	67.6%	28.9	11.5	2.39	54.1%	14.9%	25.0	-0.37
22	84.3%	74.7%	13.6	17.6	2.40	42.2%	8.4%	20.6	-0.40
All VA	92.0%	72.0%	23.7	18.6	2.50	44.0%	14.4%	21.1	0.00
Avg.	92.8%	74.7%	21.9	21.5	2.53	46.7%	16.2%	21.5	0.00
S.D.	3.7%	7.6%	5.8	10.7	0.12	12.2%	10.3%	10.6	0.66
C.V.	0.04	0.10	0.26	0.50	0.05	0.26	0.64	0.49	

* Outlined values are 1 s.d. from the mean of all VAMCs and reflect low outpatient service use after discharge from inpatient treatment.

Table 16A. Deviation of outpatient continuity of care from that of the median VISN over the first six months of treatment in FY 2000, among patients with PTSD (ICD-9 code 309.81), by VISN, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
VISN Median	15.41	11.90	2.63	4.24	0.12	0.57	0.80	2.83	
VA National Avg.	16.31	12.27	2.62	4.20	0.13	0.56	0.80	2.85	
1	1.62	1.67	0.01	0.15	-0.01	0.05	0.04	-0.10	0.73
2	5.23	2.84	0.07	0.32	-0.01	0.05	0.05	0.23	1.49
3	5.51	3.90	0.10	0.29	-0.03	0.08	0.07	-0.07	2.03
4	-3.04 X	-1.97 X	0.01	-0.09 X	-0.01	0.00	-0.01 X	-0.13	-0.30
5	2.58	2.46	-0.02	-0.02	0.00	0.06	0.05	-0.06	0.49
6	-3.62 X	-2.34 X	-0.07 X	-0.31 X	0.00	0.03	0.00	-0.27	-0.94
7	-0.37	-0.57 X	-0.07 X	-0.23 X	0.00	-0.08 X	-0.05 X	0.45	-1.07
8	-2.96 X	-1.78 X	0.00	-0.12 X	0.00	0.01	0.00	-0.18	-0.41
9	-3.06 X	-2.24 X	-0.03 X	-0.18 X	-0.01	-0.06 X	-0.06 X	-0.01	-0.97
10	3.33	0.63	-0.02	0.00	0.00	-0.01	0.01	0.38	0.14
11	0.44	-0.07	-0.03	-0.07	0.01	-0.08 X	-0.04 X	0.46	-0.72
12	6.16	2.69	0.03	0.17	-0.01	0.00	0.03	0.27	0.93
13	7.24	1.58	0.00	0.02	0.00	-0.08 X	-0.02 X	0.82	0.13
14	3.33	1.19	0.00	0.03	0.01	-0.07 X	-0.04 X	0.34	-0.18
15	2.32	1.47	0.03	0.09	-0.01	0.00	0.01	0.21	0.56
16	-1.26 X	-1.21 X	-0.04 X	-0.25 X	0.00	-0.05 X	-0.05 X	0.13	-0.91
17	-1.35 X	-0.26	-0.03	-0.05	0.01	0.03	0.01	-0.06	-0.27
18	-1.97 X	-0.84 X	0.01	0.05	0.01	-0.05 X	-0.03 X	0.18	-0.51
19	-1.02	-0.21	0.00	0.09	0.02 X	0.00	0.02	0.02	-0.19
20	-0.16	0.45	0.02	0.11	0.01	0.06	0.04	-0.13	0.33
21	0.00	0.00	-0.01	0.01	0.01 X	-0.01	-0.01 X	-0.02	-0.34
22	1.21	1.36	-0.03 X	-0.08 X	0.01	0.04	0.02	0.00	-0.02

X = Significantly different ($p < .05$) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.

Table 16B. Outpatient continuity of care over the first six months of treatment in FY 2000 among patients with PTSD (ICD-9 code 309.81), by VISN.

VISN	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	5,696	17.25	13.76	2.65	4.39	0.11	0.62	0.85	2.63
2	2,439	22.04	15.49	2.70	4.56	0.11	0.60	0.86	3.11
3	4,373	21.27	16.06	2.71	4.47	0.10	0.65	0.88	2.64
4	4,448	11.78	9.60	2.63	4.12	0.11	0.57	0.79	2.55
5	1,792	23.16	17.59	2.64	4.36	0.13	0.59	0.85	3.11
6	3,606	9.82	8.37	2.53	3.81	0.13	0.61	0.80	2.28
7	5,993	15.13	11.40	2.54	3.96	0.13	0.49	0.75	3.20
8	5,254	11.09	9.31	2.63	4.05	0.12	0.58	0.80	2.47
9	3,461	9.17	7.69	2.56	3.90	0.12	0.52	0.74	2.45
10	2,742	21.60	14.05	2.61	4.24	0.13	0.53	0.81	3.42
11	2,222	15.23	11.43	2.58	4.10	0.15	0.49	0.76	3.15
12	2,480	25.81	17.10	2.67	4.48	0.12	0.54	0.83	3.43
13	1,959	24.97	14.72	2.66	4.34	0.11	0.46	0.78	3.88
14	844	16.27	11.57	2.61	4.17	0.13	0.51	0.76	2.86
15	3,324	15.44	11.96	2.63	4.21	0.12	0.58	0.82	2.72
16	6,589	12.90	9.91	2.56	3.90	0.13	0.52	0.76	2.75
17	3,324	12.70	10.91	2.59	4.12	0.13	0.60	0.81	2.52
18	3,519	12.22	10.36	2.64	4.25	0.13	0.52	0.78	2.82
19	2,748	13.68	11.25	2.63	4.31	0.14	0.57	0.82	2.73
20	5,052	14.05	11.57	2.64	4.28	0.14	0.63	0.85	2.51
21	4,094	15.41	11.90	2.61	4.19	0.14	0.57	0.80	2.69
22	3,799	17.74	13.96	2.60	4.18	0.14	0.59	0.82	2.83
ALL VA	79,758	15.49	11.89	2.61	4.17	0.13	0.57	0.80	2.79
Avg.	3,625	16.31	12.27	2.62	4.20	0.13	0.56	0.80	2.85
S.D.	1,433	4.76	2.67	0.05	0.19	0.01	0.05	0.04	0.38
C.V	0.40	0.29	0.22	0.02	0.05	0.10	0.09	0.05	0.13

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000). †*

<i>VISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Any Psych. Outpatient Visit in 6 mos. After DC</i>	<i>Any Psych. Outpatient Visit in 30 Days After DC</i>	<i>Days to 1st OP Visit in 6 mos. After DC</i>	<i>Number of Visits in 6 mos. Among those w anyVisits</i>	<i>Continuity: Bi-months with 2 Visits</i>	<i>Dually Diagnosed: PTSD and SA Disorder</i>	<i>Any SA Outpatient Visit in 30 days After DC</i>	<i>Number of SA OP Visits in 6 mos. Among those w anyVisits</i>
1	BEDFORD	518	100.0%	100.0%	11.0	3.5	1.5	50.0%	0.0%	NA
1	BOSTON HCS †	523	93.0%	83.7%	14.4	31.1	2.4	55.8%	14.0%	9.7
1	CONNECTICUT HCS †	689	100.0%	90.0%	7.5	32.3	2.4	65.0%	45.0%	34.4
1	NORTHAMPTON	631	87.5%	66.0%	24.3	13.9	2.9	36.0%	10.0%	12.0
1	PROVIDENCE	650	90.9%	90.9%	10.3	26.8	2.6	81.8%	9.1%	23.5
1	TOGUS	402	90.0%	80.0%	11.8	27.6	2.9	20.0%	50.0%	8.8
1	WHITE RIVER JCT	405	95.8%	83.3%	14.7	20.0	2.5	16.7%	12.5%	12.0
2	ALBANY	500	90.2%	78.4%	15.1	21.6	2.5	52.9%	56.9%	25.8
2	CANANDAIGUA	532	100.0%	100.0%	9.3	18.7	2.5	83.3%	16.7%	7.0
2	SYRACUSE	670	85.7%	71.4%	15.8	38.1	2.8	50.0%	28.6%	7.2
2	WESTERN NEW YORK HCS †	528	88.9%	77.8%	18.5	26.4	2.3	33.3%	5.6%	29.3
3	BRONX	526	100.0%	66.7%	17.7	17.3	2.2	100.0%	16.7%	66.5
3	HUDSON VALLEY HCS †	620	92.9%	92.9%	7.8	35.1	2.5	57.1%	21.4%	16.8
3	NEW JERSEY HCS †	561	89.3%	78.6%	19.9	32.8	2.9	78.6%	17.9%	28.0
3	NEW YORK HARBOR HCS †	630	97.2%	75.0%	27.3	26.3	2.6	72.2%	13.9%	22.4
3	NORTHPORT	632	78.6%	78.6%	15.5	33.1	2.4	71.4%	28.6%	24.0
4	CLARKSBURG	540	98.0%	73.5%	25.4	13.4	2.5	24.5%	4.1%	2.1
4	COATESVILLE	542	83.3%	50.0%	31.7	8.4	2.2	50.0%	12.5%	4.9
4	LEBANON	595	80.0%	80.0%	10.5	10.5	2.2	60.0%	0.0%	NA
4	PHILADELPHIA	642	74.1%	48.1%	31.0	16.6	2.2	55.6%	29.6%	37.8
4	PITTSBURGH HCS †	646	88.9%	73.3%	25.7	21.4	2.6	60.0%	28.9%	9.8
4	WILKES BARRE	693	100.0%	100.0%	6.3	12.3	2.7	33.3%	0.0%	NA
5	MARTINSBURG	613	93.2%	70.5%	26.2	10.3	2.7	65.9%	18.2%	35.1
5	MARYLAND HCS †	512	93.1%	86.2%	15.0	25.4	2.4	62.1%	17.2%	14.7
5	WASHINGTON	688	94.4%	66.7%	23.9	26.6	2.5	77.8%	27.8%	44.9
6	ASHEVILLE	637	93.9%	63.6%	32.0	9.1	2.6	42.4%	3.0%	49.0
6	DURHAM	558	67.6%	32.4%	48.0	8.2	2.0	58.8%	2.9%	1.0
6	FAYETTEVILLE NC	565	92.9%	64.3%	32.7	5.5	2.0	28.6%	14.3%	30.5
6	HAMPTON	590	84.2%	53.9%	34.4	13.3	2.5	72.4%	6.6%	10.7
6	SALEM	658	94.4%	67.5%	31.6	13.2	2.6	7.9%	2.4%	14.9
6	SALISBURY	659	92.9%	76.8%	23.0	21.0	2.7	8.9%	5.4%	25.1
7	ATLANTA	508	91.3%	72.5%	21.4	18.2	2.3	63.8%	24.6%	18.5
7	AUGUSTA	509	96.5%	77.9%	21.5	31.5	2.5	43.0%	9.3%	9.4
7	CENTRAL ALABAMA VETERANS HCS †	619	89.6%	59.4%	29.6	7.9	2.4	39.6%	12.5%	14.0
7	CHARLESTON	534	88.2%	82.4%	11.5	10.1	2.5	52.9%	0.0%	1.0
7	COLUMBIA SC	544	91.4%	77.1%	17.6	18.5	2.6	40.0%	14.3%	20.2
7	DUBLIN	557	100.0%	80.0%	29.6	17.8	2.3	60.0%	0.0%	2.0
7	TUSCALOOSA	679	100.0%	81.8%	19.4	27.1	2.9	54.5%	9.1%	1.8

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000). †*

<i>VISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Any Psych. Outpatient Visit in 6 mos. After DC</i>	<i>Any Psych. Outpatient Visit in 30 Days After DC</i>	<i>Days to 1st OP Visit in 6 mos. After DC</i>	<i>Number of Visits in 6 mos. Among those w anyVisits</i>	<i>Continuity: Bi-months with 2 Visits</i>	<i>Dually Diagnosed: PTSD and SA Disorder</i>	<i>Any SA Outpatient Visit in 30 days After DC</i>	<i>Number of SA OP Visits in 6 mos. Among those w anyVisits</i>
8	BAY PINES	516	96.0%	80.0%	18.4	16.0	2.6	66.0%	58.0%	10.4
8	MIAMI	546	81.8%	72.7%	17.2	11.0	2.7	18.2%	9.1%	28.0
8	NO. FLORIDA/SO. GEORGIA VETERANS HS †	573	97.2%	83.3%	19.3	11.5	2.5	38.9%	13.9%	18.4
8	SAN JUAN	672	93.8%	68.8%	28.7	9.5	2.5	18.8%	0.0%	NA
8	TAMPA	673	94.1%	88.2%	9.1	9.9	2.5	52.9%	5.9%	2.3
8	W PALM BEACH	548	93.9%	66.7%	26.4	15.4	2.6	36.4%	9.1%	11.0
9	LEXINGTON	596	100.0%	80.0%	28.7	9.6	2.6	40.0%	0.0%	23.0
9	LOUISVILLE	603	80.0%	80.0%	15.4	6.3	2.6	30.0%	20.0%	3.0
9	MEMPHIS	614	92.6%	77.8%	20.4	19.2	2.6	25.9%	14.8%	42.8
9	MIDDLE TENNESSEE HCS: MURFREESBORO †	622	93.3%	70.0%	25.0	11.9	2.5	26.7%	13.3%	15.0
9	MIDDLE TENNESSEE HCS: NASHVILLE †	626	100.0%	78.6%	28.2	8.7	2.4	14.3%	7.1%	30.0
9	MOUNTAIN HOME	621	95.8%	70.8%	29.5	5.4	2.5	29.2%	2.1%	43.0
10	CHILLICOTHE	538	100.0%	65.0%	28.0	23.0	2.7	50.0%	10.0%	35.8
10	CINCINNATI	539	100.0%	90.7%	13.8	31.2	2.7	55.6%	13.0%	16.4
10	CLEVELAND	541	91.7%	75.0%	27.4	60.9	2.3	50.0%	25.0%	24.7
10	DAYTON	552	92.3%	76.9%	24.2	49.0	2.6	46.2%	15.4%	46.0
11	ALLEN PARK	553	62.5%	37.5%	29.6	18.6	1.9	37.5%	0.0%	
11	ANN ARBOR HCS (Ann Arbor)	506	100.0%	83.3%	15.7	37.0	2.7	100.0%	33.3%	6.0
11	BATTLE CREEK	515	91.1%	73.3%	20.0	19.5	2.5	46.7%	4.4%	6.4
11	DANVILLE, IL	550	100.0%	77.8%	16.7	12.2	2.6	55.6%	11.1%	21.0
11	INDIANAPOLIS	583	83.3%	66.7%	39.4	27.0	2.2	0.0%	0.0%	
11	NORTHERN INDIANA HCS †	610	100.0%	87.5%	21.3	8.8	2.6	56.3%	12.5%	32.7
12	CHICAGO HCS †	537	93.6%	53.2%	37.9	17.1	2.3	80.9%	36.2%	55.0
12	HINES	578	86.4%	68.2%	21.9	48.0	2.9	59.1%	22.7%	57.8
12	MADISON	607	88.9%	44.4%	30.9	18.3	2.5	11.1%	22.2%	37.5
12	MILWAUKEE	695	100.0%	91.7%	21.2	14.4	2.4	33.3%	33.3%	18.3
12	NORTH CHICAGO	556	88.2%	76.5%	19.6	43.1	2.6	64.7%	0.0%	13.0
12	TOMAH	676	100.0%	80.0%	18.2	54.8	2.4	60.0%	60.0%	55.8
13	BLACK HILLS HCS †	568	100.0%	100.0%	5.7	27.5	3.0	33.3%	100.0%	31.5
13	FARGO	437	100.0%	0.0%	35.5	6.5	2.8	0.0%	0.0%	
13	MINNEAPOLIS	618	94.1%	94.1%	8.8	64.3	2.6	70.6%	47.1%	45.6
13	SIOUX FALLS	438	100.0%	66.7%	20.7	14.7	2.3	66.7%	33.3%	23.0
13	ST CLOUD	656	100.0%	90.9%	18.4	74.7	2.7	72.7%	27.3%	19.8

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000). †*

<i>VISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Any Psych. Outpatient Visit in 6 mos. After DC</i>	<i>Any Psych. Outpatient Visit in 30 Days After DC</i>	<i>Days to 1st OP Visit in 6 mos. After DC</i>	<i>Number of Visits in 6 mos. Among those w anyVisits</i>	<i>Continuity: Bi-months with 2 Visits</i>	<i>Dually Diagnosed: PTSD and SA Disorder</i>	<i>Any SA Outpatient Visit in 30 days After DC</i>	<i>Number of SA OP Visits in 6 mos. Among those w anyVisits</i>
14	IOWA CITY	584	100.0%	100.0%	16.7	7.7	3.0	33.3%	33.3%	17.0
14	NEBRASKA-WESTERN IOWA HCS †	636	100.0%	88.2%	16.8	40.5	2.9	35.3%	0.0%	4.8
15	COLUMBIA MO	543	100.0%	33.3%	30.0	17.7	2.6	55.6%	33.3%	16.7
15	EASTERN KANSAS HCS †	677	96.0%	79.2%	22.7	21.3	2.3	53.5%	9.9%	14.6
15	KANSAS CITY	589	100.0%	92.9%	11.2	36.3	2.6	7.1%	28.6%	22.5
15	MARION IL	609	100.0%	83.3%	22.5	5.2	2.3	50.0%	16.7%	1.0
15	ST LOUIS	657	100.0%	76.2%	24.2	16.1	2.8	45.2%	11.9%	62.2
16	ALEXANDRIA	502	87.5%	62.5%	26.3	13.0	2.4	75.0%	0.0%	NA
16	CENTRAL ARKANSAS VET. HCS (No.Little Rock)	598	96.2%	76.9%	19.6	14.9	2.6	61.5%	19.2%	7.0
16	FAYETTEVILLE AR	564	94.1%	76.5%	19.6	7.6	2.7	35.3%	11.8%	1.0
16	GULF COAST HCS (Biloxi)	520	88.9%	55.6%	34.3	29.0	2.8	88.9%	0.0%	2.7
16	HOUSTON	580	100.0%	100.0%	7.5	64.1	2.3	13.6%	22.7%	15.5
16	JACKSON	586	100.0%	81.8%	19.4	17.1	2.7	63.6%	9.1%	3.5
16	NEW ORLEANS	629	90.9%	81.8%	12.6	18.1	2.7	36.4%	36.4%	10.5
16	OKLAHOMA CITY	635	96.0%	72.0%	34.3	10.1	2.3	32.0%	12.0%	10.3
16	SHREVEPORT	667	100.0%	0.0%	90.7	1.7	2.3	0.0%	0.0%	NA
17	CENTRAL TEXAS HCS †	674	93.2%	62.7%	34.0	7.7	2.5	25.4%	15.3%	25.0
17	NORTH TEXAS HCS †	549	100.0%	91.3%	13.1	14.6	2.5	52.2%	4.3%	10.5
17	SOUTH TEXAS VETERANS HCS†	671	87.2%	60.6%	30.7	7.9	2.5	18.1%	1.1%	6.7
18	NEW MEXICO HCS (Albuquerque)	501	91.2%	67.6%	23.1	15.4	2.5	55.9%	14.7%	14.1
18	PHOENIX	644	96.3%	87.0%	12.4	12.5	2.7	35.2%	3.7%	13.8
18	SOUTHERN ARIZONA HCS (Tucson)	678	75.0%	50.0%	16.7	16.0	2.0	0.0%	25.0%	2.0
18	WEST TEXAS HCS (Big Spring)	519	100.0%	66.7%	27.0	2.0	2.0	0.0%	0.0%	NA
19	DENVER	554	98.4%	89.0%	10.2	31.9	2.6	33.1%	11.8%	41.4
19	GRAND JUNCTION	575	100.0%	100.0%	11.4	32.8	2.3	0.0%	0.0%	1.0
19	MONTANA HCS †	436	100.0%	66.7%	20.0	7.0	2.8	0.0%	0.0%	NA
19	SALT LAKE CITY	660	83.3%	66.7%	28.0	31.5	2.8	58.3%	33.3%	13.2
19	SHERIDAN	666	88.9%	77.8%	22.3	18.0	2.3	72.2%	22.2%	18.2
20	BOISE	531	100.0%	80.0%	28.8	7.7	2.8	40.0%	28.0%	5.8
20	PORTLAND	648	100.0%	100.0%	10.7	15.8	2.7	33.3%	26.7%	4.3
20	PUGET SOUND HCS †	663	86.4%	60.7%	30.9	16.0	2.3	51.9%	17.3%	17.1
20	ROSEBURG HCS (Roseburg)	653	87.0%	62.3%	35.3	10.6	2.9	42.3%	2.6%	3.6
20	SPOKANE	668	100.0%	94.1%	13.1	23.6	2.4	52.9%	17.6%	8.3
20	WALLA WALLA	687	100.0%	87.5%	19.3	11.5	2.3	37.5%	0.0%	7.0
21	CENTRAL CALIFORNIA HCS (Fresno)	570	87.5%	50.0%	45.4	7.9	2.5	62.5%	37.5%	70.0
21	HONOLULU	459	100.0%	90.9%	24.9	22.9	2.6	54.5%	18.2%	21.3
21	PALO ALTO HCS †	640	89.1%	58.7%	31.5	9.1	2.3	50.0%	8.7%	16.1
21	SAN FRANCISCO	662	100.0%	100.0%	9.6	16.0	2.2	60.0%	20.0%	18.0
21	SIERRA NEVADA HCS (Reno)	654	100.0%	100.0%	8.3	5.0	3.0	75.0%	25.0%	15.0
22	GREATER LOS ANGELES HCS †	691	75.0%	68.8%	10.5	16.1	2.6	40.6%	12.5%	16.3

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 1999-March 31, 2000). †*

<i>VISN</i>	<i>STATION</i>	<i>CODE</i>	<i>Any Psych. Outpatient Visit in 6 mos. After DC</i>	<i>Any Psych. Outpatient Visit in 30 Days After DC</i>	<i>Days to 1st OP Visit in 6 mos. After DC</i>	<i>Number of Visits in 6 mos. Among those w anyVisits</i>	<i>Continuity: Bi-months with 2 Visits</i>	<i>Dually Diagnosed: PTSD and SA Disorder</i>	<i>Any SA Outpatient Visit in 30 days After DC</i>	<i>Number of SA OP Visits in 6 mos. Among those w anyVisits</i>
22	LOMA LINDA	605	95.0%	80.0%	16.8	12.8	2.6	25.0%	0.0%	1.7
22	LONG BEACH	600	90.9%	90.9%	8.0	40.7	2.9	18.2%	18.2%	76.0
22	SAN DIEGO	664	80.0%	60.0%	20.4	11.1	2.1	90.0%	0.0%	5.0
22	SOUTHERN NEVADA HCS (Las Vegas)	593	90.0%	80.0%	15.3	11.9	2.3	60.0%	10.0%	8.0
ALL VA			92.0%	72.0%	23.7	18.6	2.5	44.0%	14.0%	21.1
AVERAGE			93.1%	74.6%	21.9	20.1	2.5	45.8%	16.2%	20.0
SD			7.5%	17.6%	10.9	13.8	0.3	22.8%	15.8%	16.7
CV			0.08	0.24	0.50	0.69	0.10	0.50	0.97	0.84

* Outlined values are 1 s.d. from the mean of all VAMCs and reflect low outpatient service delivery.

† Data not comparable to previous reports due to consolidation.

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2000, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.). ‡

VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC			12.32	10.95	2.65	4.49	0.17	0.57	0.79	2.72	
VA National Avg.			14.85	11.35	2.60	4.13	0.13	0.57	0.80	2.74	
	1 BEDFORD	518	10.28	6.88	0.05	0.24	-0.07	0.00	0.02	0.90	0.60
	1 BOSTON HCS ‡	523	1.49	1.62	0.00 X	0.08	-0.04	0.11	0.08	-0.48	0.38
	1 CONNECTICUT HCS ‡	689	5.61	4.58	0.08	0.42	-0.06	0.11	0.09	-0.23	0.81
	1 MANCHESTER	608	-0.51	-0.05	0.02	0.12	-0.08	0.07	0.06	-0.24	0.33
	1 NORTHAMPTON	631	1.24	1.48	0.06	0.15	-0.06	-0.13	-0.08	0.60	-0.31
	1 PROVIDENCE	650	2.20	3.36	0.00	0.14	-0.05	0.07	0.03	-0.06	0.27
	1 TOGUS	402	0.97	-0.18 X	-0.11 X	-0.24 X	-0.02	-0.01	-0.01 X	0.16	-0.40
	1 WHITE RIVER JCT	405	0.61	0.58	0.02	0.07	-0.04	0.02	0.03	0.33	0.05
	2 ALBANY	500	5.28	2.71	0.10	0.42	-0.05	0.10	0.08	-0.14	0.68
	2 BATH	514	4.46	1.98	0.10	0.17	-0.10	-0.06 X	-0.01 X	0.81	0.26
	2 CANANDAIGUA	532	8.92	7.25	0.05	0.45	-0.04	0.05	0.06	0.46	0.70
	2 SYRACUSE	670	1.04	0.20	0.05	0.15	-0.04	0.05	0.04	0.00	0.19
	2 WESTERN NEW YORK HCS ‡	528	8.13	3.69	0.05	0.20	-0.07	0.02	0.06	0.57	0.54
	3 BRONX	526	12.86	6.47	0.06	0.47	-0.05	0.13	0.11	-0.25	1.09
	3 HUDSON VALLEY HCS ‡	620	11.50	8.24	0.17	0.61	-0.10	0.02	0.07	0.36	1.13
	3 NEW JERSEY HCS ‡	561	2.62	1.56	0.08	-0.01 X	-0.08	0.11	0.07	-0.20	0.58
	3 NEW YORK HARBOR HCS ‡	630	5.03	3.66	0.06	0.24	-0.06	0.02	0.04	0.19	0.42
	3 NORTHPORT	632	6.36	5.69	0.14	0.32	-0.07	0.18	0.13	-0.51	1.16
	4 ALTOONA	503	3.08	2.09	0.11	0.39	-0.08	-0.09 X	-0.01 X	0.29	0.17
	4 BUTLER	529	-0.32	-0.79	-0.12	-0.31	-0.08	0.06	0.03	-0.11	-0.06
	4 CLARKSBURG	540	-1.69	-1.63	0.00	-0.32	-0.07	0.06	0.03	-0.07	-0.02
	4 COATESVILLE	542	1.44	1.32	0.03	0.25	-0.03	0.06	0.05	-0.09	0.24
	4 ERIE	562	-5.26	-3.23	-0.12	-0.47 X	-0.06	-0.02	-0.10	-0.14	-0.81
	4 LEBANON	595	-2.31	-1.65	0.05	-0.11 X	-0.06	-0.07 X	-0.06 X	0.20	-0.40
	4 PHILADELPHIA	642	-7.88 X	-5.26 X	-0.04	-0.19	-0.02	0.06	0.02	-0.73	-0.47
	4 PITTSBURGH HCS ‡	646	0.98	1.09	0.06	0.04	-0.07	-0.08 X	-0.05 X	0.40	-0.17
	4 WILKES BARRE	693	-2.46	-1.56	0.03	-0.25	-0.10	-0.04 X	-0.05 X	-0.08	-0.27
	4 WILMINGTON	460	-5.93	-4.64 X	-0.10 X	-0.60 X	-0.05	0.08	0.02	-0.54	-0.46
	5 MARTINSBURG	613	0.88	1.13	-0.03 X	-0.33 X	-0.08	0.18	0.09	-0.56	0.48
	5 MARYLAND HCS ‡	512	2.36	2.83	-0.04	0.12	-0.01	0.05	0.04	0.15	0.07
	5 WASHINGTON DC	688	6.19	4.59	0.01	0.07	-0.03	-0.01 X	0.03	0.20	0.19
	6 ASHEVILLE	637	-0.63 X	-0.14 X	0.06	0.10	-0.11	-0.02 X	-0.03	0.04	0.07
	6 BECKLEY	517	-4.29 X	-3.52 X	-0.06	-0.49	-0.11	0.04	0.00	-0.37	-0.24
	6 DURHAM	558	-3.89 X	-2.56 X	-0.19	-0.62 X	0.03	0.04	-0.01 X	-0.24	-0.86
	6 FAYETTEVILLE NC	565	-3.62	-2.46	-0.02	-0.45	0.04	0.09	0.04	-0.41	-0.50
	6 HAMPTON	590	-0.69 X	0.09	-0.03 X	-0.03 X	-0.03	-0.02 X	-0.01 X	-0.07	-0.27
	6 RICHMOND	652	-3.13 X	-1.27 X	-0.04	-0.28	-0.03	0.13	0.06	-0.37	-0.04
	6 SALEM	658	-1.74 X	-1.21 X	-0.07	-0.27	-0.08	-0.01	-0.02	-0.13	-0.29
	6 SALISBURY	659	-3.12	-2.13 X	-0.08	-0.37 X	-0.04	0.07	0.03	-0.47	-0.25

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2000, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.). ‡

VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC			12.32	10.95	2.65	4.49	0.17	0.57	0.79	2.72	
VA National Avg.			14.85	11.35	2.60	4.13	0.13	0.57	0.80	2.74	
63	7 ATLANTA	508	-3.40	-1.97	-0.06	-0.27	-0.02	-0.01	-0.03	-0.17	-0.57
	7 AUGUSTA	509	8.98	5.30	-0.03	-0.10	-0.04	-0.08 X	-0.01 X	1.08	-0.01
	7 BIRMINGHAM	521	0.87	0.09	0.04	0.02	-0.06	-0.06	-0.04	0.38	-0.18
	7 CENTRAL ALABAMA VETERANS HCS ‡	619	-1.90	-0.89 X	-0.08	-0.30	-0.02	-0.05	-0.05	0.21	-0.66
	7 CHARLESTON	534	-2.46 X	-1.65 X	-0.05	-0.09	-0.01	-0.03 X	-0.03	0.05	-0.54
	7 COLUMBIA SC	544	-0.09 X	-0.40	-0.08	-0.23	-0.06	-0.07 X	-0.05 X	0.44	-0.49
	7 DUBLIN	557	-0.44	-1.01	-0.15	-0.51	-0.05	-0.04	-0.04	0.34	-0.59
	7 TUSCALOOSA	679	5.14	2.87	-0.08 X	-0.20 X	-0.05	-0.23 X	-0.14 X	1.62	-0.77
	8 BAY PINES	516	-1.09	-0.88	0.00 X	-0.42 X	-0.06	-0.01 X	-0.03 X	-0.04	-0.33
	8 MIAMI	546	-1.82 X	-0.55 X	-0.01	0.07	-0.02	0.06	0.03	-0.22	-0.06
	8 NO. FLORIDA/SO. GEORGIA VETERANS HS ‡	573	-2.86 X	-1.59 X	0.00	-0.11 X	-0.05	0.01	0.00	-0.22	-0.21
	8 SAN JUAN	672	25.83	12.49	-0.06	0.01	-0.18	-0.20	0.01	1.80	0.89
	8 TAMPA	673	-2.18	-1.46	0.00	-0.16	-0.04	0.00	0.01	-0.10	-0.24
	8 W PALM BEACH	548	-1.69 X	-0.82 X	0.06	0.08	-0.04	0.02	0.01	-0.21	-0.07
	9 HUNTINGTON	581	-2.82 X	-1.97 X	0.03	-0.18	-0.04	-0.18	-0.16	0.36	-0.96
	9 LEXINGTON	596	1.83	0.30	0.04	0.14	-0.08	-0.04	-0.01	0.13	0.05
	9 LOUISVILLE	603	-2.82 X	-1.95 X	-0.03	-0.12 X	-0.06	-0.03 X	-0.03 X	-0.04	-0.37
	9 MEMPHIS	614	-2.85	-1.14	-0.02 X	-0.16 X	-0.03	0.00	0.00	-0.21	-0.33
	9 MIDDLE TENNESSEE: NASHVILLE ‡	626	-3.42	-1.94	-0.17	-0.49	-0.02	-0.05 X	-0.10 X	-0.15	-0.99
	9 MIDDLE TENNESSEE HCS: MURFREESBORO ‡	622	-1.58 X	-1.65 X	0.00	-0.17	-0.06	-0.02	-0.01 X	-0.08	-0.25
	9 MOUNTAIN HOME	621	-2.00 X	-1.13 X	-0.06	-0.20	-0.07	-0.03 X	-0.04 X	-0.03	-0.37
	10 CHILLICOTHE	538	-0.73	-0.06 X	-0.06	-0.45 X	-0.08	0.03	-0.01	-0.17	-0.16
	10 CINCINNATI	539	0.84	1.56	0.03	0.22	-0.01	0.01	0.02	0.31	0.00
	10 CLEVELAND	541	6.39	1.12	-0.01	0.07	-0.04	-0.04	0.01	0.69	0.03
	10 COLUMBUS	757	3.30	1.61	0.08	0.04	-0.08	0.00	0.02	0.22	0.27
	10 DAYTON	552	7.70	2.39	-0.06	-0.11	-0.05	0.00	0.02	0.44	0.07
	11 ALLEN PARK	553	4.11	4.16	-0.04	0.00	-0.02	-0.04	-0.04 X	0.70	-0.17
	11 ANN ARBOR HCS (Ann Arbor)	506	4.97	1.74	0.00	0.10	-0.02	-0.02	0.01	0.31	-0.02
	11 BATTLE CREEK	515	2.11	0.78	0.00 X	-0.03	-0.02	-0.15	-0.04 X	0.97	-0.53
	11 DANVILLE, IL	550	-1.90 X	-1.58 X	-0.04 X	-0.13 X	-0.06	0.00	-0.01	-0.07	-0.25
	11 INDIANAPOLIS	583	4.47	3.58	0.03	0.26	0.01	-0.07 X	0.00	0.73	-0.11
	11 NORTHERN INDIANA HCS ‡	610	-0.49	-0.97	-0.04	-0.35	-0.07	-0.13	-0.11	0.43	-0.71
	11 SAGINAW	655	-2.28	-1.84	-0.04 X	-0.21	-0.04	-0.02 X	-0.02	-0.07	-0.41
	12 CHICAGO HCS ‡	537	11.46	5.57	0.03	0.22	-0.04	0.01	0.04	0.29	0.52
	12 HINES	578	6.94	3.50	0.08	0.24	-0.04	0.03	0.05	0.24	0.47
	12 IRON MOUNTAIN	585	11.56	4.88	0.05	0.32	-0.03	-0.05 X	0.02	0.56	0.34
	12 MADISON	607	-1.73 X	-1.54	0.03	0.06	-0.03	0.03	0.02	-0.13	-0.11
	12 MILWAUKEE	695	1.32	1.83	0.08	0.25	-0.06	0.08	0.05	-0.28	0.47
	12 NORTH CHICAGO	556	8.16	3.18	-0.05	0.13	-0.03	-0.06	0.02	0.90	0.03
	12 TOMAH	676	8.89	3.33	0.00	-0.01	-0.09	-0.04 X	0.00 X	0.72	0.25

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VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC			12.32	10.95	2.65	4.49	0.17	0.57	0.79	2.72	
VA National Avg.			14.85	11.35	2.60	4.13	0.13	0.57	0.80	2.74	
	13 BLACK HILLS HCS ‡	568	20.93	10.47	0.07	0.21	-0.06	-0.02	0.05	1.18	0.95
	13 FARGO	437	-1.31 X	-1.00 X	0.15	-0.01 X	0.03	-0.03 X	-0.05	-0.18	-0.46
	13 MINNEAPOLIS	618	3.70	0.00	0.04	0.09	-0.03	-0.09	-0.03	0.64	-0.24
	13 SIOUX FALLS	438	2.64	1.61	0.03	0.18	-0.08	0.08	0.07	-0.07	0.51
	13 ST CLOUD	656	11.98	2.77	-0.05	-0.12 X	-0.06	-0.14 X	-0.06	1.43	-0.20
	14 CENTRAL IOWA HCS ‡	555	13.18	5.43	-0.04 X	-0.14	-0.07	-0.19 X	-0.12 X	1.25	-0.30
	14 IOWA CITY	584	0.00	-0.37 X	0.00	-0.04	0.01	0.01	-0.02 X	0.11	-0.32
	14 NEBRASKA-WESTERN IOWA HCS ‡	636	0.84	0.21	0.00 X	0.03	-0.03	-0.02	-0.01 X	0.10	-0.22
	14 NEBRASKA-WESTERN IOWA HCS: LINCOLN ‡	597	1.66	1.57	0.10	0.31	-0.07	-0.04 X	0.02	-0.12	0.22
	15 COLUMBIA MO	543	1.46	-0.23	-0.07 X	-0.25 X	-0.02	0.01	0.02	0.18	-0.26
	15 EASTERN KANSAS HCS ‡	677	12.37	8.69	0.04	0.30	-0.06	-0.05	0.02	0.99	0.55
	15 KANSAS CITY	589	0.76	0.73	0.07	0.21	-0.06	0.13	0.09	-0.39	0.54
	15 MARION IL	609	-2.31 X	-1.97 X	-0.01	-0.10 X	-0.07	-0.02 X	-0.04	-0.12	-0.32
	15 POPLAR BLUFF	647	-1.56	-1.29	0.13	0.08	-0.08	-0.05	-0.01 X	0.00	0.00
	15 ST LOUIS	657	4.39	3.06	0.00	0.08	-0.06	0.05	0.04	0.15	0.33
	15 WICHITA	452	3.05	2.47	0.12	0.33	-0.05	-0.06 X	0.02	0.55	0.19
	16 ALEXANDRIA	502	-0.63 X	0.27	0.13	0.33	-0.09	0.05	0.00	0.08	0.35
	16 CENTRAL ARKANSAS VET. HCS (No. Little Rock)	598	0.59	1.32	0.05	-0.06 X	-0.07	-0.14 X	-0.10 X	0.73	-0.40
	16 FAYETTEVILLE AR	564	-1.02	-0.93	-0.08	-0.37	-0.04	-0.09 X	-0.07 X	0.05	-0.70
	16 GULF COAST HCS (Biloxi)	520	-1.72 X	-1.17 X	-0.05	-0.41 X	-0.04	-0.03 X	-0.04	-0.02	-0.50
	16 HOUSTON	580	1.74	0.71	-0.04	-0.27	-0.05	-0.05 X	-0.05 X	0.40	-0.35
	16 JACKSON	586	-3.28	-2.11 X	0.01	-0.07 X	-0.07	-0.01 X	-0.02 X	0.15	-0.25
	16 MUSKOGEE	623	-3.29	-2.63	-0.04 X	-0.34 X	-0.05	-0.03 X	-0.05 X	-0.10	-0.55
	16 NEW ORLEANS	629	-1.62 X	-0.22 X	0.02	0.13	-0.03	-0.03	-0.01	-0.06	-0.23
	16 OKLAHOMA CITY	635	11.03	1.55	-0.17	-0.55	0.00	0.03	0.04	0.10	-0.17
	16 SHREVEPORT	667	-1.68	-0.77	-0.12	-0.37 X	-0.06	-0.02	-0.02	-0.05	-0.43
	17 CENTRAL TEXAS VETERANS HCS ‡	674	0.75	1.32	0.03	0.24	-0.04	-0.04 X	-0.02 X	0.40	-0.09
	17 NORTH TEXAS HCS ‡	549	-0.15 X	0.61	-0.09 X	-0.15 X	-0.01	0.03	0.01	-0.05	-0.29
	17 SOUTH TEXAS VETERANS HCS ‡	671	-1.42	-0.53	0.01	-0.20 X	-0.06	0.09	0.05	-0.39	0.11
	18 AMARILLO	504	-3.26 X	-2.37 X	-0.10	-0.46 X	-0.03	-0.05 X	-0.06 X	-0.14	-0.77
	18 EL PASO HCS (El Paso OPC)	756	1.14	1.75	0.05	0.27	-0.04	0.05	0.06	-0.17	0.29
	18 NEW MEXICO HCS (Albuquerque)	501	-1.56	-0.10	0.06	0.19	-0.04	-0.03 X	-0.01 X	0.36	-0.11
	18 NORTHERN ARIZONA HCS (Prescott)	649	-1.21	-0.42	0.03	-0.05 X	0.03	0.10	0.06	-0.30	-0.07
	18 PHOENIX	644	-1.12	-0.75	0.00	-0.01 X	-0.05	-0.11 X	-0.06 X	0.39	-0.48
	18 SOUTHERN ARIZONA (Tucson)	678	1.37	1.50	0.03	0.14	0.00	-0.05 X	-0.04 X	0.25	-0.33
	18 WEST TEXAS HCS (Big Spring)	519	-2.40	-2.10 X	-0.28 X	-0.56 X	-0.01	-0.14 X	-0.20 X	0.03	-1.53

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2000, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.). ‡

VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Summary Continuity of Outpatient Care (Avg Z)
Median: VAMC			12.32	10.95	2.65	4.49	0.17	0.57	0.79	2.72	
VA National Avg.			14.85	11.35	2.60	4.13	0.13	0.57	0.80	2.74	
	19 CHEYENNE	442	-1.65	-0.42 X	-0.02 X	0.07	-0.01	0.08	0.05	-0.32	-0.03
	19 DENVER	554	2.82	2.25	0.00	0.07	-0.03	0.01	0.03	0.37	0.06
	19 GRAND JUNCTION	575	-1.65 X	-0.67 X	0.11	0.22	-0.10	-0.01 X	0.00	-0.12	0.19
	19 MONTANA HCS ‡	436	-1.38	-0.53	0.01	-0.08	-0.06	0.07	0.02	-0.33	0.02
	19 SALT LAKE CITY	660	0.30	0.97	0.03	0.11	-0.01	0.00	0.03	0.17	-0.08
	19 SHERIDAN	666	-3.27	-0.86	-0.02	0.05	-0.02	-0.03	-0.01	-0.04	-0.37
	19 SOUTHERN COLORADO HCS (Fort Lyon)	567	-0.41	0.15	0.01	0.23	-0.02	0.00	0.02	-0.08	-0.06
	20 ROSEBURG HCS (Roseburg)	653	1.39	1.59	0.04	0.10	-0.03	-0.02 X	-0.01 X	0.14	-0.07
	20 ALASKA HCS & RO (Anchorage)	463	31.39	28.71	0.84	3.58	-0.21	0.14	0.27	0.44	4.85
	20 BOISE	531	-3.09	-0.77	0.12	0.33	-0.05	0.12	0.08	-0.56	0.44
	20 PORTLAND	648	-1.31 X	0.03	0.03	0.08	-0.04	0.14	0.09	-0.62	0.36
	20 PUGET SOUND HCS ‡	663	3.95	3.15	0.05	0.26	-0.03	0.04	0.05	0.25	0.33
	20 SPOKANE	668	-2.87 X	-1.77 X	-0.16	-0.53 X	0.00	0.11	0.04	-0.47	-0.44
	20 WALLA WALLA	687	-3.07	-1.78	0.02	-0.24	-0.06	0.00	-0.02	-0.03	-0.29
	20 WHITE CITY	692	-0.20	0.28	0.05	0.18	-0.08	0.03	0.01	-0.19	0.18
	21 CENTRAL CALIFORNIA HCS (Fresno)	570	10.63	2.01	0.00	-0.32	-0.01	0.21	0.11	-0.60	0.63
	21 HONOLULU	459	38.45	34.24	0.91	3.88	-0.23	0.15	0.31	0.77	5.52
	21 MANILA	358	-4.20	-3.81	-0.26	-1.01 X	0.15	0.15	0.02	-0.60	-1.28
	21 NORTHERN CALIFORNIA HCS ‡	612	-3.35 X	-2.29 X	-0.09 X	-0.30 X	0.00 X	0.02	-0.01 X	-0.32	-0.59
	21 PALO ALTO HCS ‡	640	-0.55	0.29	0.06	0.24	-0.04	-0.03	0.00	0.07	-0.04
	21 SAN FRANCISCO	662	4.45	2.89	0.01	0.11	-0.06	-0.12 X	-0.07	0.64	-0.19
	21 SIERRA NEVADA HCS (Reno)	654	-4.38 X	-0.65 X	-0.11	-0.19 X	0.02	0.03	-0.03	-0.37	-0.65
	22 GREATER LOS ANGELES HCS ‡	691	5.57	4.09	-0.04 X	-0.04 X	-0.04	0.06	0.05	0.00	0.28
	22 LOMA LINDA	605	-0.39 X	0.57	0.03	-0.02	-0.06	0.03	0.02	0.03	0.07
	22 LONG BEACH	600	-1.77	-0.45	0.01	-0.16	-0.03	0.05	0.03	-0.12	-0.10
	22 SAN DIEGO	664	0.93	1.32	-0.02	-0.02 X	-0.01	-0.01 X	0.00	0.35	-0.23
	22 SOUTHERN NEVADA HCS (Las Vegas)	593	-2.31 X	-1.14 X	-0.13 X	-0.40 X	-0.01	0.06	0.00 X	-0.28	-0.48

X = Significantly different (p<.05) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.

‡ Data not comparable to previous reports dues to consolidation.

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2000, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	518	BEDFORD	255	28.00	20.18	2.69	4.54	0.09	0.56	0.83	3.80
1	523	BOSTON HCS ‡	1831	18.55	14.77	2.67	4.48	0.11	0.66	0.89	2.37
1	689	CONNECTICUT HCS ‡	887	23.18	17.72	2.73	4.73	0.10	0.65	0.89	2.75
1	608	MANCHESTER	473	11.60	9.83	2.64	4.29	0.08	0.66	0.87	2.21
1	631	NORTHAMPTON	494	13.11	11.31	2.66	4.30	0.11	0.46	0.73	3.03
1	650	PROVIDENCE	623	15.07	13.75	2.61	4.34	0.13	0.64	0.83	2.48
1	402	TOGUS	685	14.33	10.38	2.50	3.92	0.14	0.57	0.79	2.74
1	405	WHITE RIVER JCT	448	12.13	10.10	2.62	4.21	0.13	0.60	0.83	2.78
2	500	ALBANY	770	20.89	14.53	2.73	4.68	0.12	0.65	0.88	2.72
2	514	BATH	200	24.56	16.40	2.73	4.46	0.08	0.48	0.79	4.01
2	532	CANANDAIGUA	428	28.45	21.39	2.69	4.77	0.13	0.58	0.86	3.62
2	670	SYRACUSE	362	15.45	11.43	2.68	4.39	0.12	0.60	0.84	2.72
2	528	WESTERN NEW YORK HCS ‡	679	22.09	14.74	2.67	4.41	0.10	0.59	0.86	3.17
3	526	BRONX	412	27.92	18.34	2.66	4.67	0.12	0.69	0.91	2.47
3	620	HUDSON VALLEY HCS ‡	561	28.55	21.14	2.78	4.79	0.09	0.58	0.87	3.21
3	561	NEW JERSEY HCS ‡	1241	14.57	11.42	2.67	4.11	0.09	0.71	0.88	2.17
3	630	NEW YORK HARBOR HCS ‡	1519	22.24	16.82	2.70	4.54	0.11	0.57	0.84	3.05
3	632	NORTHPORT	640	21.32	17.38	2.78	4.60	0.09	0.75	0.94	2.15
4	503	ALTOONA	105	14.10	11.20	2.69	4.46	0.10	0.48	0.78	2.70
4	529	BUTLER	97	13.15	9.75	2.51	3.90	0.10	0.62	0.83	2.55
4	540	CLARKSBURG	532	8.49	6.96	2.60	3.77	0.10	0.64	0.82	2.27
4	542	COATESVILLE	648	16.10	12.84	2.64	4.45	0.14	0.62	0.85	2.57
4	562	ERIE	95	8.56	7.73	2.53	3.82	0.11	0.53	0.70	2.51
4	595	LEBANON	461	9.62	8.21	2.66	4.05	0.10	0.53	0.74	2.59
4	642	PHILADELPHIA	933	12.13	9.55	2.65	4.27	0.13	0.58	0.82	2.47
4	646	PITTSBURGH HCS ‡	943	13.54	11.22	2.66	4.21	0.10	0.50	0.75	2.92
4	693	WILKES BARRE	381	9.17	7.96	2.63	3.90	0.07	0.54	0.75	2.39
4	460	WILMINGTON	253	7.35	6.00	2.52	3.61	0.11	0.65	0.82	2.03
5	613	MARTINSBURG	503	15.60	12.54	2.54	3.78	0.10	0.75	0.89	2.13
5	512	MARYLAND HCS ‡	559	20.36	16.35	2.61	4.48	0.16	0.59	0.84	3.14
5	688	WASHINGTON DC	730	30.51	22.01	2.72	4.66	0.12	0.48	0.83	3.77
6	637	ASHEVILLE	499	8.66	7.92	2.62	4.10	0.07	0.58	0.77	2.26
6	517	BECKLEY	246	5.08	4.69	2.52	3.54	0.07	0.63	0.79	1.86
6	558	DURHAM	594	7.08	6.41	2.38	3.38	0.21	0.62	0.78	2.18
6	565	FAYETTEVILLE NC	284	7.93	6.89	2.57	3.63	0.22	0.66	0.83	2.08
6	590	HAMPTON	553	14.63	11.91	2.55	4.11	0.15	0.54	0.79	2.70
6	652	RICHMOND	307	12.66	10.68	2.59	3.98	0.13	0.68	0.86	2.48
6	658	SALEM	470	11.56	9.35	2.56	3.96	0.08	0.55	0.78	2.52
6	659	SALISBURY	653	9.13	7.75	2.50	3.72	0.13	0.65	0.82	2.02

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2000, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
7	508	ATLANTA	963	16.93	12.60	2.60	4.14	0.14	0.49	0.77	3.16
7	509	AUGUSTA	742	22.08	15.77	2.56	4.05	0.13	0.49	0.78	3.64
7	521	BIRMINGHAM	846	13.64	10.46	2.63	4.16	0.11	0.52	0.76	2.92
7	619	CENTRAL ALABAMA VETERANS HCS ‡	736	12.55	10.31	2.48	3.76	0.18	0.51	0.74	2.94
7	534	CHARLESTON	535	9.37	7.96	2.53	3.97	0.17	0.53	0.76	2.55
7	544	COLUMBIA SC	1050	12.05	9.38	2.51	3.86	0.12	0.51	0.75	2.91
7	557	DUBLIN	409	11.11	8.11	2.39	3.44	0.14	0.55	0.76	2.81
7	679	TUSCALOOSA	712	21.11	14.93	2.53	4.04	0.12	0.31	0.65	4.55
8	516	BAY PINES	1008	13.29	10.52	2.61	3.83	0.12	0.54	0.77	2.74
8	546	MIAMI	659	14.88	12.21	2.63	4.38	0.14	0.61	0.84	2.65
8	573	NO. FLORIDA/SO. GEORGIA VETERANS HS ‡	1280	9.95	8.62	2.61	4.06	0.11	0.57	0.79	2.40
8	672	SAN JUAN	340	7.61	6.86	2.69	3.88	0.10	0.62	0.81	2.32
8	673	TAMPA	1352	9.81	8.37	2.62	4.01	0.12	0.58	0.81	2.37
8	548	W PALM BEACH	615	10.52	9.04	2.67	4.22	0.13	0.60	0.81	2.28
9	581	HUNTINGTON	707	6.49	6.02	2.58	3.78	0.15	0.41	0.63	2.62
9	596	LEXINGTON	494	11.97	8.74	2.61	4.16	0.09	0.54	0.78	2.47
9	603	LOUISVILLE	383	8.80	7.59	2.57	4.00	0.11	0.55	0.76	2.40
9	614	MEMPHIS	374	12.91	10.70	2.61	4.08	0.12	0.54	0.79	2.71
9	626	MIDDLE TENNESSEE: NASHVILLE ‡	294	8.31	7.65	2.43	3.65	0.14	0.52	0.69	2.36
9	622	MIDDLE TENNESSEE HCS: MURFREESBORO ‡	620	9.61	7.55	2.58	3.91	0.11	0.56	0.79	2.34
9	621	MOUNTAIN HOME	589	7.85	7.16	2.49	3.78	0.11	0.56	0.75	2.26
10	538	CHILLICOTHE	378	11.83	9.89	2.52	3.63	0.11	0.60	0.78	2.38
10	539	CINCINNATI	519	19.85	15.49	2.67	4.55	0.16	0.53	0.82	3.45
10	541	CLEVELAND	1182	26.65	15.56	2.63	4.41	0.13	0.49	0.81	3.98
10	757	COLUMBUS	241	16.80	12.12	2.66	4.15	0.11	0.57	0.82	2.85
10	552	DAYTON	422	21.08	12.89	2.52	4.00	0.14	0.56	0.81	3.07
11	553	ALLEN PARK	243	26.63	20.37	2.65	4.49	0.14	0.45	0.76	4.20
11	506	ANN ARBOR HCS (Ann Arbor)	294	19.55	12.98	2.61	4.29	0.15	0.55	0.81	3.00
11	515	BATTLE CREEK	598	14.48	10.71	2.57	4.04	0.17	0.41	0.75	3.54
11	550	DANVILLE, IL	384	10.04	7.98	2.54	3.93	0.12	0.57	0.78	2.45
11	583	INDIANAPOLIS	249	19.57	15.21	2.66	4.54	0.18	0.47	0.79	3.54
11	610	NORTHERN INDIANA HCS ‡	264	10.54	8.05	2.52	3.66	0.12	0.46	0.69	2.82
11	655	SAGINAW	190	7.68	6.61	2.53	3.81	0.15	0.57	0.78	2.25
12	537	CHICAGO HCS ‡	693	36.52	23.19	2.70	4.70	0.13	0.50	0.84	4.02
12	578	HINES	313	26.16	17.65	2.72	4.57	0.12	0.57	0.85	3.33
12	585	IRON MOUNTAIN	121	27.04	16.46	2.69	4.57	0.14	0.48	0.81	3.49
12	607	MADISON	192	13.08	9.86	2.66	4.30	0.13	0.59	0.82	2.62
12	695	MILWAUKEE	460	17.37	13.99	2.72	4.53	0.10	0.62	0.85	2.65
12	556	NORTH CHICAGO	326	27.17	17.27	2.58	4.43	0.14	0.47	0.81	4.02
12	676	TOMAH	375	21.02	12.95	2.59	4.07	0.08	0.53	0.79	3.26

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2000, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
13	568	BLACK HILLS HCS ‡	314	37.72	22.85	2.70	4.46	0.11	0.50	0.84	4.27
13	437	FARGO	52	10.21	7.63	2.71	3.94	0.21	0.52	0.74	2.48
13	618	MINNEAPOLIS	845	17.83	10.95	2.67	4.33	0.12	0.46	0.77	3.37
13	438	SIOUX FALLS	194	12.53	9.80	2.60	4.17	0.09	0.66	0.86	2.30
13	656	ST CLOUD	554	34.40	18.26	2.65	4.38	0.09	0.34	0.72	5.13
14	555	CENTRAL IOWA HCS ‡	238	24.64	14.77	2.56	3.99	0.09	0.39	0.68	3.64
14	584	IOWA CITY	201	12.32	9.56	2.61	4.14	0.18	0.58	0.78	2.66
14	636	NEBRASKA-WESTERN IOWA HCS ‡	199	14.04	10.73	2.59	4.18	0.16	0.54	0.79	2.71
14	597	NEBRASKA-WESTERN IOWA HCS: LINCOLN ‡	206	12.63	10.63	2.68	4.39	0.11	0.54	0.82	2.28
15	543	COLUMBIA MO	295	12.11	8.40	2.50	3.77	0.17	0.59	0.82	2.62
15	677	EASTERN KANSAS HCS ‡	754	27.49	20.20	2.66	4.51	0.11	0.50	0.82	3.78
15	589	KANSAS CITY	500	14.49	11.53	2.69	4.40	0.11	0.70	0.89	2.20
15	609	MARION IL	514	6.84	5.99	2.55	3.90	0.11	0.58	0.76	2.10
15	647	POPLAR BLUFF	385	8.01	6.83	2.70	4.08	0.10	0.54	0.78	2.30
15	657	ST LOUIS	518	14.62	11.79	2.56	4.10	0.12	0.64	0.84	2.44
15	452	WICHITA	358	15.62	12.48	2.72	4.46	0.12	0.51	0.82	3.08
16	502	ALEXANDRIA	132	10.20	9.16	2.69	4.33	0.10	0.62	0.79	2.51
16	598	CENTRAL ARKANSAS VET. HCS (No. Little Rock)	1035	14.61	12.07	2.64	4.06	0.11	0.42	0.70	3.44
16	564	FAYETTEVILLE AR	623	7.52	6.43	2.48	3.56	0.14	0.51	0.73	2.25
16	520	GULF COAST HCS (Biloxi)	1056	8.86	7.74	2.53	3.64	0.13	0.56	0.76	2.32
16	580	HOUSTON	946	15.26	11.45	2.58	3.94	0.11	0.51	0.75	3.02
16	586	JACKSON	380	12.22	9.37	2.65	4.18	0.09	0.51	0.77	3.20
16	623	MUSKOGEE	626	7.37	6.36	2.55	3.75	0.12	0.57	0.75	2.22
16	629	NEW ORLEANS	989	15.55	12.60	2.63	4.34	0.15	0.51	0.78	2.91
16	635	OKLAHOMA CITY	528	23.37	11.41	2.42	3.54	0.17	0.62	0.84	2.58
16	667	SHREVEPORT	274	11.17	9.36	2.49	3.77	0.12	0.54	0.78	2.56
17	674	CENTRAL TEXAS VETERANS HCS ‡	1037	13.17	11.39	2.61	4.35	0.14	0.54	0.78	2.89
17	549	NORTH TEXAS HCS ‡	1084	15.24	12.38	2.53	4.09	0.16	0.58	0.81	2.75
17	671	SOUTH TEXAS VETERANS HCS ‡	1203	10.02	9.17	2.62	3.94	0.11	0.68	0.85	2.00
18	504	AMARILLO	270	8.13	7.16	2.51	3.68	0.13	0.54	0.75	2.22
18	756	EL PASO HCS (El Paso OPC)	457	12.31	11.18	2.66	4.41	0.13	0.64	0.86	2.22
18	501	NEW MEXICO HCS (Albuquerque)	1147	14.20	11.90	2.71	4.49	0.11	0.50	0.78	3.34
18	649	NORTHERN ARIZONA HCS (Prescott)	200	8.90	7.92	2.60	3.92	0.20	0.69	0.86	2.06
18	644	PHOENIX	1032	11.88	9.71	2.62	4.19	0.11	0.46	0.74	2.91
18	678	SOUTHERN ARIZONA (Tucson)	372	12.61	10.72	2.60	4.18	0.17	0.53	0.76	2.66
18	519	WEST TEXAS HCS (Big Spring)	41	4.32	4.17	2.24	3.24	0.17	0.46	0.59	2.10

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2000, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
19	442	CHEYENNE	242	10.30	9.19	2.59	4.22	0.16	0.64	0.84	2.20
19	554	DENVER	731	18.77	14.44	2.65	4.39	0.13	0.55	0.83	3.20
19	575	GRAND JUNCTION	154	10.16	8.86	2.69	4.31	0.07	0.56	0.80	2.38
19	436	MONTANA HCS ‡	173	9.57	8.33	2.56	3.92	0.13	0.65	0.82	2.13
19	660	SALT LAKE CITY	614	14.87	12.08	2.67	4.36	0.16	0.54	0.82	3.02
19	666	SHERIDAN	137	12.55	10.61	2.57	4.18	0.16	0.49	0.77	3.00
19	567	SOUTHERN COLORADO HCS (Fort Lyon)	697	10.48	9.26	2.61	4.32	0.15	0.58	0.82	2.34
20	653	ROSEBURG HCS (Roseburg)	523	13.31	11.38	2.65	4.25	0.14	0.56	0.79	2.58
20	463	ALASKA HCS & RO (Anchorage)	190	7.64	7.04	2.55	3.93	0.18	0.71	0.87	1.92
20	531	BOISE	379	11.68	10.52	2.76	4.58	0.11	0.68	0.88	2.16
20	648	PORTLAND	996	12.18	10.60	2.66	4.31	0.12	0.70	0.88	2.09
20	663	PUGET SOUND HCS ‡	2222	17.87	14.02	2.66	4.44	0.14	0.61	0.85	2.92
20	668	SPOKANE	414	8.99	7.64	2.46	3.60	0.16	0.68	0.83	2.09
20	687	WALLA WALLA	166	8.02	7.20	2.58	3.76	0.13	0.57	0.77	2.45
20	692	WHITE CITY	162	7.65	7.04	2.58	4.03	0.11	0.62	0.79	2.01
21	570	CENTRAL CALIFORNIA HCS (Fresno)	266	23.62	12.38	2.59	3.78	0.16	0.79	0.91	1.92
21	459	HONOLULU	565	14.20	12.14	2.62	4.16	0.16	0.75	0.91	2.11
21	358	MANILA	46	4.33	4.33	2.35	3.30	0.15	0.82	0.88	1.35
21	612	NORTHERN CALIFORNIA HCS ‡	1176	12.60	9.94	2.55	3.99	0.17	0.56	0.79	2.55
21	640	PALO ALTO HCS ‡	1045	13.38	11.29	2.68	4.44	0.12	0.54	0.80	2.71
21	662	SAN FRANCISCO	814	21.10	15.43	2.64	4.35	0.10	0.43	0.73	3.52
21	654	SIERRA NEVADA HCS (Reno)	182	14.43	12.78	2.55	4.17	0.18	0.52	0.75	3.01
22	691	GREATER LOS ANGELES HCS ‡	1623	24.30	17.97	2.62	4.32	0.14	0.58	0.85	3.11
22	605	LOMA LINDA	720	12.71	11.03	2.65	4.18	0.10	0.61	0.82	2.60
22	600	LONG BEACH	321	15.75	12.59	2.65	4.14	0.14	0.59	0.83	2.83
22	664	SAN DIEGO	658	13.10	11.30	2.59	4.13	0.16	0.57	0.80	2.81
22	593	SOUTHERN NEVADA HCS (Las Vegas)	477	10.76	9.32	2.47	3.79	0.17	0.63	0.80	2.28
All VA			79,758	15.49	11.89	2.61	4.17	0.13	0.57	0.80	2.79
Avg.			562	14.85	11.35	2.60	4.13	0.13	0.57	0.80	2.74
S.D.			370	6.68	3.97	0.09	0.33	0.03	0.08	0.06	0.60
C.V			0.66	0.45	0.35	0.03	0.08	0.23	0.14	0.07	0.22

‡ Data not comparable to previous reports dues to consolidation.

Table 18. Overall PTSD Performance Score, by VISN†.

<i>VISN</i>	<i>Inpatient Summary Score Average Z: Weighted# (Table 14)</i>	<i>Outpatient Summary Score Average Z: Weighted (Table 16)</i>	<i>Summary Continuity of Outpatient Care Average Z (Table 16A)</i>	<i>Total PTSD Summary Score Average Z: (+=desired)</i>	<i>Rank Order On Total PTSD Summary Score</i>
1	-0.32	-0.34	0.73	0.03	10
2	-0.25	0.41	1.49	0.55	4
3	-0.59	0.54	2.03	0.66	2
4	-0.44	-0.67	-0.30	-0.47	19
5	-1.13	0.47	0.49	-0.06	13
6	-0.77	-0.99	-0.94	-0.90	22
7	-0.19	-0.38	-1.07	-0.55	20
8	0.39	-0.05	-0.41	-0.02	12
9	0.34	-0.38	-0.97	-0.34	17
10	0.94	0.68	0.14	0.59	3
11	-0.90	-0.46	-0.72	-0.69	21
12	-0.50	0.58	0.93	0.33	5
13	1.69	1.69	0.13	1.17	1
14	-0.09	0.50	-0.18	0.08	9
15	-0.71	0.46	0.56	0.10	8
16	0.64	-0.19	-0.91	-0.15	15
17	-0.02	-0.87	-0.27	-0.39	18
18	1.23	-0.21	-0.51	0.17	7
19	0.08	0.74	-0.19	0.21	6
20	0.47	-0.76	0.33	0.02	11
21	0.18	-0.37	-0.34	-0.18	16
22	0.02	-0.40	-0.02	-0.13	14
Avg.	0.0	0.0	0.0	0.0	
S.D.	0.7	0.0	0.8	0.5	

Sign is reversed so that high scores reflect difference in the desired direction -- low inpatient utilization.

† Rankings only comparable to FY 1998 report.

Table 19. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 1999 to March 31, 2000, by PTSD diagnosis and program type, by VISN†.

VISN	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
1	310	93.9%	1,679	99.1%	543	99.8%
2	89	93.3%	836	96.5%	0	NA
3	98	95.9%	1,503	94.9%	470	97.2%
4	153	90.2%	1,568	97.6%	181	92.8%
5	91	84.6%	903	94.1%	467	87.2%
6	339	77.3%	1,947	97.0%	172	98.3%
7	319	94.0%	1,747	95.7%	122	97.5%
8	163	97.5%	2,112	97.3%	0	NA
9	139	94.2%	1,688	93.4%	386	91.7%
10	99	70.7%	1,180	94.8%	401	95.8%
11	90	93.3%	1,677	95.4%	229	98.7%
12	112	94.6%	1,515	97.5%	440	98.4%
13	39	89.7%	742	95.8%	16	93.8%
14	20	90.0%	513	93.2%	32	100.0%
15	172	74.4%	1,726	96.2%	121	99.2%
16	132	97.7%	2,636	95.3%	75	93.3%
17	235	88.1%	1,423	94.7%	305	96.4%
18	95	97.9%	1,132	96.6%	220	92.3%
19	165	78.8%	749	96.0%	0	NA
20	359	89.7%	1,111	96.7%	559	97.7%
21	74	94.6%	1,127	96.8%	294	96.3%
22	83	96.4%	1,484	96.4%	0	NA
All VA	3,376	89.0%	30,998	96.0%	5,033	96.0%
Average	153	89.9%	1,409	96.0%	229	95.9%
S.D.	96	7.7%	493	1.4%	188	3.3%
C.V.	0.62	0.09	0.35	0.01	0.82	0.03

† Does not include PRRP and domiciliary care.

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 1999 to March 31, 2000, by PTSD diagnosis and program type, by VAMC†.

VISN	Station	Code	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
			Number of Unique Patients w PTSD Dx.	Reside in VISN in which treatment was delivered	Number of Unique Patients w. no PTSD Dx.	Reside in VISN in which treatment was delivered	Number of Unique Patients Any Dx.	Reside in VISN in which treatment was delivered
1	BEDFORD	518	2	100.0%	369	99.2%	0	0.0%
1	BOSTON HCS ‡	523	43	100.0%	563	99.3%	362	99.7%
1	CONNECTICUT HCS ‡	689	20	100.0%	200	98.0%	93	100.0%
1	NORTHAMPTON	631	200	91.0%	121	100.0%	55	100.0%
1	PROVIDENCE	650	11	100.0%	214	99.1%	0	0.0%
1	TOGUS	402	10	100.0%	105	100.0%	33	100.0%
1	WHITE RIVER JCT	405	24	95.8%	107	98.1%	0	0.0%
2	ALBANY	500	51	94.1%	160	95.6%	0	0.0%
2	BATH	514	0	0.0%	1	100.0%	0	0.0%
2	CANANDAIGUA	532	6	100.0%	222	97.7%	0	0.0%
2	SYRACUSE	670	14	100.0%	131	96.9%	0	0.0%
2	WESTERN NEW YORK HCS ‡	528	18	83.3%	322	96.0%	0	0.0%
3	BRONX	526	6	83.3%	190	98.4%	0	0.0%
3	HUDSON VALLEY HCS ‡	620	14	92.9%	233	90.6%	84	91.7%
3	NEW JERSEY HCS ‡	561	28	100.0%	354	92.7%	4	100.0%
3	NEW YORK HARBOR HCS ‡	630	36	97.2%	526	96.0%	215	97.7%
3	NORTHPORT	632	14	92.9%	200	97.5%	167	99.4%
4	CLARKSBURG	540	49	81.6%	54	94.4%	9	88.9%
4	COATESVILLE	542	24	95.8%	254	97.2%	0	0.0%
4	LEBANON	595	5	80.0%	118	100.0%	0	0.0%
4	PHILADELPHIA	642	27	96.3%	456	98.7%	0	0.0%
4	PITTSBURGH HCS ‡	646	45	93.3%	522	96.6%	0	0.0%
4	WILKES BARRE	693	3	100.0%	164	97.6%	172	93.0%
5	MARTINSBURG	613	44	90.9%	154	90.3%	178	91.0%
5	MARYLAND HCS ‡	512	29	72.4%	441	96.1%	289	84.8%
5	WASHINGTON DC	688	18	88.9%	308	93.2%	0	0.0%
6	ASHEVILLE	637	33	87.9%	126	89.7%	0	0.0%
6	DURHAM	558	34	100.0%	293	98.6%	0	0.0%
6	FAYETTEVILLE NC	565	14	100.0%	231	98.7%	0	0.0%
6	HAMPTON	590	76	98.7%	413	98.1%	146	98.6%
6	RICHMOND	652	0	0.0%	270	97.0%	26	96.2%
6	SALEM	658	126	64.3%	289	94.1%	0	0.0%
6	SALISBURY	659	56	51.8%	325	98.2%	0	0.0%
7	ATLANTA	508	69	97.1%	355	96.6%	83	97.6%
7	AUGUSTA	509	86	90.7%	247	97.2%	39	97.4%
7	CENTRAL ALABAMA VETERANS HCS ‡	619	96	93.8%	430	94.2%	0	0.0%
7	CHARLESTON	534	17	100.0%	234	97.9%	0	0.0%
7	COLUMBIA SC	544	35	94.3%	157	94.9%	0	0.0%
7	DUBLIN	557	5	100.0%	78	92.3%	0	0.0%
7	TUSCALOOSA	679	11	90.9%	246	95.1%	0	0.0%
8	BAY PINES	516	50	98.0%	379	96.6%	0	0.0%
8	MIAMI	546	11	90.9%	321	96.9%	0	0.0%
8	NO. FLORIDA/SO. GEORGIA VETERANS HS ‡	573	36	94.4%	411	94.9%	0	0.0%
8	SAN JUAN	672	16	100.0%	342	99.7%	0	0.0%
8	TAMPA	673	17	100.0%	349	98.0%	0	0.0%
8	W PALM BEACH	548	33	100.0%	310	98.4%	0	0.0%
9	LEXINGTON	596	10	100.0%	232	96.1%	0	0.0%
9	LOUISVILLE	603	10	100.0%	318	97.2%	0	0.0%

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 1999 to March 31, 2000, by PTSD diagnosis and program type, by VAMC†.

VISN	Station	Code	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
			Number of Unique Patients w PTSD Dx.	Reside in VISN in which treatment was delivered	Number of Unique Patients w. no PTSD Dx.	Reside in VISN in which treatment was delivered	Number of Unique Patients Any Dx.	Reside in VISN in which treatment was delivered
9	MEMPHIS	614	27	96.3%	269	95.2%	240	94.2%
9	MIDDLE TENNESSEE HCS: MURFREESBORO ‡	622	30	90.0%	486	92.0%	0	0.0%
9	MIDDLE TENNESSEE HCS: NASHVILLE ‡	626	14	100.0%	170	91.8%	44	95.5%
9	MOUNTAIN HOME	621	48	91.7%	213	86.9%	102	84.3%
10	CHILLICOTHE	538	20	85.0%	355	92.1%	0	0.0%
10	CINCINNATI	539	54	53.7%	180	97.2%	54	96.3%
10	CLEVELAND	541	12	100.0%	437	95.7%	220	94.5%
10	DAYTON	552	13	92.3%	208	95.7%	127	97.6%
11	ALLEN PARK	553	8	100.0%	332	98.5%	229	98.7%
11	ANN ARBOR HCS (Ann Arbor)	506	6	100.0%	210	97.6%	0	0.0%
11	BATTLE CREEK	515	45	93.3%	581	97.2%	0	0.0%
11	DANVILLE, IL	550	9	77.8%	179	87.7%	0	0.0%
11	INDIANAPOLIS	583	6	100.0%	124	92.7%	0	0.0%
11	NORTHERN INDIANA HCS ‡	610	16	93.8%	251	92.0%	0	0.0%
12	CHICAGO HCS ‡	537	47	95.7%	407	99.0%	0	0.0%
12	HINES	578	22	100.0%	344	98.5%	248	98.8%
12	MADISON	607	9	88.9%	156	96.8%	0	0.0%
12	MILWAUKEE	695	12	100.0%	256	98.0%	186	97.8%
12	NORTH CHICAGO	556	17	88.2%	264	96.6%	6	100.0%
12	TOMAH	676	5	80.0%	88	88.6%	0	0.0%
13	BLACK HILLS HCS ‡	568	6	100.0%	108	92.6%	0	0.0%
13	FARGO	437	2	100.0%	83	97.6%	0	0.0%
13	MINNEAPOLIS	618	17	88.2%	221	95.9%	0	0.0%
13	SIOUX FALLS	438	3	100.0%	60	91.7%	16	93.8%
13	ST CLOUD	656	11	81.8%	270	97.4%	0	0.0%
14	IOWA CITY	584	3	100.0%	139	90.6%	0	0.0%
14	NEBRASKA-WESTERN IOWA HCS ‡	636	17	88.2%	374	94.1%	32	100.0%
15	COLUMBIA MO	543	9	88.9%	101	96.0%	0	0.0%
15	EASTERN KANSAS HCS ‡	677	101	60.4%	562	95.4%	0	0.0%
15	KANSAS CITY	589	14	100.0%	382	94.8%	0	0.0%
15	MARION IL	609	6	100.0%	139	95.7%	0	0.0%
15	ST LOUIS	657	42	92.9%	542	98.3%	121	99.2%
16	ALEXANDRIA	502	8	100.0%	163	98.2%	0	0.0%
16	CENTRAL ARKANSAS VET. HCS (No. Little Rock)	598	26	96.2%	392	94.9%	0	0.0%
16	FAYETTEVILLE AR	564	17	94.1%	206	94.7%	0	0.0%
16	GULF COAST HCS (Biloxi)	520	9	100.0%	458	92.6%	0	0.0%
16	HOUSTON	580	22	100.0%	406	96.3%	8	87.5%
16	JACKSON	586	11	90.9%	183	96.2%	66	93.9%
16	NEW ORLEANS	629	11	100.0%	201	98.0%	0	0.0%
16	OKLAHOMA CITY	635	25	100.0%	395	96.7%	1	100.0%
16	SHREVEPORT	667	3	100.0%	232	93.1%	0	0.0%
17	CENTRAL TEXAS VETERANS HCS ‡	674	118	78.8%	486	92.0%	1	100.0%
17	NORTH TEXAS HCS ‡	549	23	95.7%	436	95.9%	0	0.0%
17	SOUTH TEXAS VETERANS HCS ‡	671	94	97.9%	501	96.4%	304	96.4%
18	NEW MEXICO HCS (Albuquerque)	501	34	94.1%	321	95.3%	0	0.0%
18	PHOENIX	644	54	100.0%	557	97.8%	0	0.0%
18	SOUTHERN ARIZONA (Tucson)	678	4	100.0%	158	96.2%	135	96.3%
18	WEST TEXAS HCS (Big Spring)	519	3	100.0%	96	93.8%	85	85.9%

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 1999 to March 31, 2000, by PTSD diagnosis and program type, by VAMC†.

VISN	Station	Code	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
			<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
19	DENVER	554	127	73.2%	281	97.2%	0	0.0%
19	GRAND JUNCTION	575	5	100.0%	80	98.8%	0	0.0%
19	MONTANA HCS ‡	436	3	100.0%	62	96.8%	0	0.0%
19	SALT LAKE CITY	660	12	100.0%	239	94.1%	0	0.0%
19	SHERIDAN	666	18	94.4%	87	94.3%	0	0.0%
20	BOISE	531	25	80.0%	85	96.5%	0	0.0%
20	PORTLAND	648	15	100.0%	266	98.5%	167	100.0%
20	PUGET SOUND HCS ‡	663	216	96.8%	468	97.0%	163	99.4%
20	ROSEBURG HCS (Roseburg)	653	78	67.9%	167	92.2%	176	94.3%
20	SPOKANE	668	17	100.0%	80	96.3%	0	0.0%
20	WALLA WALLA	687	8	100.0%	45	100.0%	53	96.2%
21	CENTRAL CALIFORNIA (Fresno)	570	8	87.5%	163	93.3%	77	90.9%
21	HONOLULU	459	11	100.0%	106	98.1%	0	0.0%
21	NORTHERN CALIFORNIA HCS ‡	612	0	0.0%	1	100.0%	0	0.0%
21	PALO ALTO HCS ‡	640	46	95.7%	571	97.7%	217	98.2%
21	SAN FRANCISCO	662	5	100.0%	92	98.9%	0	0.0%
21	SIERRA NEVADA HCS (Reno)	654	4	75.0%	194	95.4%	0	0.0%
22	GREATER LOS ANGELES HCS ‡	691	32	96.9%	567	96.8%	0	0.0%
22	LOMA LINDA	605	20	100.0%	258	98.4%	0	0.0%
22	LONG BEACH	600	11	100.0%	273	97.8%	0	0.0%
22	SOUTHERN NEVADA HCS (Las Vegas)	593	10	90.0%	145	89.0%	0	0.0%
22	SAN DIEGO	664	10	90.0%	241	96.3%	0	0.0%
All VA			3,376	89.1%	30,998	96.1%	5,033	95.8%
Avg.			29	90.7%	263	95.9%	43	34.1%
S.D.			36	17.7%	144	2.8%	80	46.2%
C.V.			1.24	0.19	0.55	0.03	1.88	1.35

† Does not include PRRP and domiciliary care.

‡ Data not comparable to previous reports due to consolidation.

PART II: TREATMENT OF VETERANS BY SPECIALIZED PTSD OUTPATIENT TEAMS

Part II presents data on the clinical operation of the PTSD Clinical Team (PCT) and Substance Use PTSD Team (SUPT) programs for FY 2000. The data presented in this chapter are derived from PTSD Status Forms (PSFs) that are completed by staff members for each veteran newly admitted to treatment by their specialized programs within FY 2000. A “newly admitted” veteran is defined as one who has not been in treatment with the particular specialized program in the past 12 months before this admission. This means that only one PSF per veteran per program within any 12-month period is kept in the dataset. “Treatment” is defined as more than one visit to the program for this episode of therapy. ¹

Throughout the presentation, variables assessing key aspects of the programs’ specialized mission are designated as critical monitors. Other variables that are descriptive of the veteran population being served are presented to provide a more extensive picture. The data are evaluated at both the program and the VISN level. Programs that deviate by more than one standard deviation from the average for all programs are identified as outliers. In addition to comparing each individual program to the other programs, each VISN is compared to other VISNs.

Comprehensive Evaluation and Monitoring Procedures

VA's Northeast Program Evaluation Center (NEPEC), the Evaluation Division of the National Center for PTSD, monitors and evaluates the administrative and clinical operation of all of the specialized programs for PTSD. The patient-specific data presented in this section of the report were collected by clinicians whose primary responsibility was delivering clinical care rather than collecting data. Although some variation in administration and reporting is to be expected, several procedures were instituted to minimize this variation:

- a. *Manuals.* Detailed manuals were written describing the correct manner of administration of the questionnaire, the conventions for coding responses to ambiguous questions, and the recommended solutions to other common problems in data collection.
- b. *Individualized Training.* Each program designates two staff persons to serve as the local director and data manager of the monitoring protocol. Individualized training is given over the telephone to these staff persons for each new program that is added to the national network and to each new staff member of an existing program who has been designated as director or data manager.

¹ In Part III, data are presented for “New vets treated” as determined from the Stop Code data. “New vets treated” in Part III is defined as those veterans who have more than one visit recorded in the Austin Outpatient File within FY 2000 but no visits during the previous fiscal year. It should be noted that the definition of “new vets treated” in Part III is more stringent than the definition of “newly admitted” veterans in Part II. The definition of “treated” remains the same, that is, seen more than once.

c. *Data Reporting and Management.* Data managers enter the data that have been collected by clinicians electronically into the National Mental Health Data Base located at the Pittsburgh VA Medical Center at Highland Drive. Each month, NEPEC downloads these data from Pittsburgh and appends them to a master file. The new data are reviewed at NEPEC for errors and inconsistencies. When problems are identified, they are corrected through telephone calls or letters to the programs.

d. *Contact with the programs.* Feedback on the progress of data collection and discussion of systematic changes in the conduct of the evaluation take place during monthly conference calls in which all programs are invited to participate. Tables summarizing monthly data by program are distributed by mail and displayed on the VA Intranet.

Rationale of the Monitoring Protocol

Specialized treatment of PTSD is a relatively new clinical activity, requiring considerable freedom for clinical innovation. Evaluation efforts are based on the assumption that rigid regulations or performance standards are not appropriate for the programs in their current stages of development, and that premature standardization might stifle the creative evolution of new interventions or combinations of existing interventions that would prove to be particularly efficacious. At the same time, it is important to evaluate the programs as completely and objectively as possible.

Although absolute practice standards have not been established for the treatment of PTSD, statistical norms can be derived from the distribution of data across the individual programs. The distinction between statistical norms and formal practice standards is an important one. Practice standards are established by a consensus of professionals and codify how health care should be conducted. Statistical norms, in contrast, reflect how health care is practiced on average, without specifying exactly what is and what is not acceptable practice. Practice variation can be measured and statistical outliers can be identified. The identification of statistical outliers must not be confused with the identification of practice standard violations. Statistical outliers are extremes on a continuum and, as such, deserve attention. However, without further exploration of specific circumstances, no conclusions can be drawn regarding their exact meaning.

Monitoring Instrument

A three-page PTSD Status Form (PSF) is used to monitor the most salient characteristics of the veterans being treated by the outpatient specialized PTSD programs. The PSF includes the principal demographic, military, social adjustment, and diagnostic information from the War Stress Interview -Part 1 (WSI-1). The WSI-1 was one of the primary instruments that were used in earlier, more intensive studies of the implementation and outcomes of the specialized outpatient PTSD programs. The PSF was revised a few years ago by the addition of two questions of special interest to VA leadership: evaluation of PTSD due to military sexual trauma and evaluation of PTSD due to military noncombat nonsexual trauma.

Critical Monitors for Outpatient Programs

Through the selection of critical monitors, we have sought to highlight those features of the operation of the programs that are most relevant to their specialized mission. Eight of the evaluation measures were selected as critical monitors for outpatient programs. The first five are characteristics of the population being served: war zone service, clinical diagnosis of PTSD, diagnosis of substance abuse, prior psychiatric treatment of any type, and prior specialized PTSD treatment in particular. Three critical monitors concern the performance of program staff: validation of war zone service by the DD214, number of veterans evaluated per FTEE, and the proportion of new veterans treated who were enrolled in the monitoring protocol. The directionality of these monitors that is in accordance with the programs' mission is **high** percentages of war zone service, diagnoses of PTSD and substance abuse, validation of war zone service by the DD214, number of veterans monitored per FTEE, and proportion of veterans who were seen who were monitored. **Low** percentages of veterans who had prior specialized PTSD treatment or psychiatric treatment of any type are in accordance with the programs' defined mission.

It must, once again, be emphasized that these monitors should not necessarily be considered, by themselves, to be indicators of the appropriateness of the administrative or clinical operation of particular programs. They can properly be used only to identify statistical outliers, the importance of which must be determined by follow-up discussions with the programs. Since any modification of administrative and/or clinical practices must take place at the level of the individual program, it is essential that an evaluation examine the data at both this level as well as at the VISN level.

Comparison of VISNs and Individual Programs on Critical Monitors

Outlier performance is indicated by any value that is 1 standard deviation from the mean of all VISNs or of all specialized programs, and is marked by a boxed cell. Outlier status for the VISNs as a whole is presented in Tables 2-1, 2-3 and 2-5. The particular individual programs contributing most prominently to the VISNs' outlier status are identified in Tables 2-2, 2-4 and 2-6. Table 2-7 summarizes the number of critical monitors that are outliers for each VISN.

VISNs 1, 2 and 20 are outliers in veterans' **war zone service**. The particular programs contributing most to the outlier status are the Boston HCS (Boston) PCT, the Connecticut HCS (West Haven) PCT and the Providence PCT within VISN 1; the Canandaigua PCT within VISN 2; and the Boise PCT, the Portland PCT, and the Puget Sound HCS (Seattle) PCT within VISN 20. Other individual programs which are outliers are the Coatesville PCT within VISN 4; the Maryland HCS PCTs at Baltimore and Perry Point within VISN 5; the Hampton PCT within VISN 6; the Louisville PCT within VISN 9; the Black Hills HCS (Fort Meade) SUPT within VISN 13; the Wichita PCT within VISN 15; and the Southern Arizona HCS (Tucson) PCT within VISN 18. The percentage of veterans who have served in a war zone is lower in these VISNs and individual programs than in other VISNs and programs.

VISNs 2, 8 and 13 are outliers in *PTSD clinical diagnosis*. The particular programs contributing most to the outlier status are the Canandaigua PCT within VISN 2; the Bay Pines SUPT and the Tampa PCT within VISN 8; and the Minneapolis PCT within VISN 13. Other individual programs which are outliers are the Coatesville PCT within VISN 4; the Maryland PCTs at Baltimore and Perry Point within VISN 5; the Salisbury PCT in VISN 6; the Charleston PCT within VISN 7; the Cincinnati PCT within VISN 10; the Ann Arbor PCT within VISN 11; the Central Iowa HCS (Knoxville) PCT within VISN 14; the Houston and the Jackson PCTs within VISN 16; the El Paso PCT within VISN 18; and the Boise PCT within VISN 20. The percentage of veterans who have a clinical diagnosis of PTSD is lower in these VISNs and individual programs than in others.

VISNs 10, 14 and 16 are outliers in *substance abuse diagnosis*. Within these VISNs the particular programs contributing most to the outlier status are the Columbus PCT in VISN 10; and the Jackson PCT within VISN 16. No individual program in VISN 14 was an outlier, but all four programs there were below the mean for substance abuse diagnosis. Other individual programs which are outliers include the Manchester PCT within VISN 1; the Bronx PCT within VISN 3; the Asheville PCT within VISN 6; the Augusta PCT within VISN 7; the San Juan PCT within VISN 8; the Lexington PCT within VISN 9; the Poplar Bluff and the St. Louis PCTs within VISN 15; the Southern Arizona HCS (Tucson) PCT within VISN 18; and the Salt Lake City PCT within VISN 19. The percentage of veterans who are diagnosed with a substance abuse disorder is lower in these VISNs and individual programs than in others.

VISNs 3, 5 and 6 are outliers in *validation of war zone service by DD214*. Within these VISNs the particular programs contributing most to the outlier status are the New Jersey HCS (East Orange) PCT and the New York Harbor HCS (Brooklyn) PCT in VISN 3; the Washington D.C. PCT within VISN 5; and the Durham and Salisbury PCTs in VISN 6. In addition, other programs which are outliers are the Connecticut HCS (West Haven) PCT and SUPT and the Providence PCT with VISN 1; the Augusta and Charleston PCTs within VISN 7; the San Juan and Tampa PCTs within VISN 8; the Ann Arbor PCT within VISN 11; the Nebraska-Western Iowa HCS (Lincoln) PCT within VISN 14; the St. Louis PCT within VISN 15; the Jackson PCT within VISN 16; the Central Texas Veterans HCS (Temple) PCT within VISN 17; the Southern Arizona HCS (Tucson) PCT within VISN 18; the Puget Sound HCS (Seattle) PCT within VISN 20; and the Palo Alto HCS (San Jose) PCT within VISN 21. The percentage of veterans admitted to treatment without having their war zone service verified by reference to the DD214 or similar military records is lower in these VISNs and individual programs than it is in others.

VISNs 2 and 22 are outliers in admitting higher percentages of veterans who have had *prior psychiatric treatment*. The Canandaigua PCT within VISN 2 was the program contributing most to the outlier status. No individual programs within VISN 22 were outliers, although three of the four programs there were above the mean. In addition, other individual programs which are outliers include the Boston HCS (Brockton) PCT, the Connecticut HCS (West Haven) SUPT and the Manchester PCT in VISN 1; the Pittsburgh HCS (Highland Drive) SUPT in VISN 4; the Asheville PCT in VISN 6; the Augusta PCT in VISN 7; the Miami PCT and the San Juan PCT in VISN 8; the Battle Creek PCT in VISN 11; the Nebraska-Western Iowa HCS (Lincoln) PCT in VISN 14; the Poplar Bluff PCT in VISN 15; the Grand Junction PCT in

VISN 19; and the San Francisco SUPT in VISN 21. The percentage of veterans who have had prior psychiatric treatment was higher in these VISNs and individual programs than in others.

VISNs 2, 7, 8, 12, 19 and 20 are outliers in admitting veterans who have had **prior specialized PTSD treatment**. No individual program within VISN 2 was an outlier, but both programs there were above the mean for prior specialized PTSD treatment. Within the other outlier VISNs, the Augusta PCT and the Tuscaloosa PCT within VISN 7; the Bay Pines SUPT and the No. Florida/So. Georgia HCS (Gainesville) within VISN 8; the Chicago HCS (West Side) PCT within VISN 12; the Grand Junction PCT within VISN 19; and the Boise PCT within VISN 20 were outliers. Outlier programs within other VISNs include the Connecticut HCS (West Haven) SUPT within VISN 1; the Coatesville PCT within VISN 4; the Augusta and Tuscaloosa PCTs within VISN 7; the Phoenix PCT within VISN 18; and the San Francisco SUPT within VISN 21. The percentage of veterans who have had prior specialized PTSD treatment was higher in these VISNs and individual programs than in others.

VISNs 4, 13 and 21 are outliers in the **number of PSFs submitted per FTEE**. The number of PTSD Status Forms per FTEE submitted was lower in these VISNs than in the others, although within these VISNs, no individual program was an outlier. Within VISN 4, three of the four programs were below the mean; within VISN 13 all three programs were below the mean, and within VISN 21 all five programs were below the mean. Outlier programs within other VISNs include the White River Junction PCT within VISN 1; the Western New York HCS (Batavia) PCT within VISN 2; the Brecksville PCT within VISN 10; and the Northern Indiana HCS (Marion) PCT within VISN 11. The number of PSFs submitted per FTEE was lower in these individual programs than in others.

VISNs 2, 4, 5 and 21 are outliers in the **proportion of PSFs submitted per total number of new individuals treated**. The proportion of PTSD Status Forms per new veterans treated was lower in these VISNs than in others. The Western New York HCS (Batavia) PCT within VISN 2 and the Maryland HCS (Perry Point) PCT with VISN 5 were outliers. No individual program was an outlier within VISN 4 or VISN 21. Outlier programs within other VISNs include the White River Junction PCT within VISN 1 and the New Orleans PCT within VISN 16. The number of PSFs submitted per total number of new veterans treated for the year was lower in these VISNs and these individual programs than in others.

The number of critical monitors that were outliers is tabulated for each VISN in Table 2-7. Adjustment for the different number of programs across the VISNs was made by calculating the mean number of outliers for each VISN. VISNs that are outliers for the outliers themselves are VISN 1, VISN 2, VISN 5 and VISN 8. The mean number of outliers was higher in these VISNs than in others.

Description of Veterans' Other Characteristics

Several other veterans' characteristics are presented for descriptive purposes in Tables 2-5, 2-8, 2-10, 2-12, 2-14, 2-16, 2-18 and 2-20 for the VISNs and Tables 2-6, 2-9, 2-11, 2-13, 2-15, 2-17, 2-19 and 2-21 for individual programs. These characteristics have not been designated as critical monitors because they have not been considered critical for evaluating the operation of the programs with regard to carrying out the mission of specialized PTSD programs. Further, outliers have not been identified because it is often not possible to define one tail of the distribution as more or less desirable than the other tail. A description of the population being served by the programs can be summarized at the VISN level as follows.

Veterans averaged 53.1 years of age (sd=0.9). Eighty-eight percent (sd=4%) had a high school education or more, and 68% (sd=6%) were not working currently. Twenty-six percent (sd=7%) reported difficulty controlling violent behavior. Ninety-six percent (sd=3%) were male; and currently 50% (sd=7%) were married, 38% (sd=4%) were separated or divorced, and 9% (sd=4%) had never been married. Sixty-seven percent (sd=19%) were Caucasian, 23% (sd=19%) African-American, 7% (sd=9%) Hispanic and 3% (sd=3%) were of other racial/ethnic background.

Six percent (sd=2%) served during the World War II era, 5% (sd=1%) during the Korean War era, 76% (sd=6%) during the Vietnam War era, and 8% (sd=4%) during the Persian Gulf War era. Eighty-three percent (sd=7%) were exposed to enemy/friendly fire; 9% (sd=4%) participated in atrocities; and 3% (sd=1%) were prisoners of war. Fifty-six percent (sd=7%) of the veterans were service connected.

At the time of admission to the programs, 63% (sd=9%) of the veterans were already prescribed psychotropic medications; 44% (sd=13%) were diagnosed with an Axis I nonpsychotic disorder other than PTSD; 7% (sd=4%) were diagnosed with an Axis I psychotic disorder; and 9% (sd=6%) were diagnosed with an Axis II personality disorder. Seventy-two percent (sd=11%) were referred by another VAMC program; 5% (sd=3%) were referred from a Vet Center; 15% (sd=7%) were self-referred; and 7% (sd=8%) were referred from other sources. Seventy-two percent (sd=5%) of the veterans reported having a chronic medical problem which interfered with their lives; 20% (sd=6%) reported having been incarcerated for more than two weeks over their lifetime; 4% (sd=3%) were evaluated for PTSD due to sexual trauma which occurred during active military duty, and 8% (sd=5%) were evaluated for PTSD due to noncombat nonsexual trauma incurred in the course of military duties.

Table 2-1. War Zone Service and Clinical Diagnosis Among Veterans in
Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	N	War Zone Service	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation By DD214
1	578	81%	81%	90%	40%	54%
2	184	67%	61%	88%	54%	92%
3	423	90%	83%	90%	37%	35%
4	241	93%	79%	90%	53%	61%
5	238	82%	75%	94%	48%	48%
6	457	84%	78%	87%	37%	33%
7	695	92%	86%	94%	35%	55%
8	474	92%	68%	88%	40%	63%
9	260	95%	94%	98%	52%	84%
10	414	92%	90%	93%	18%	89%
11	232	91%	81%	89%	44%	82%
12	171	95%	99%	99%	67%	76%
13	235	82%	72%	86%	55%	80%
14	189	87%	79%	93%	30%	80%
15	446	88%	86%	91%	34%	60%
16	700	91%	76%	91%	29%	69%
17	688	87%	91%	94%	46%	52%
18	632	83%	81%	93%	32%	50%
19	350	92%	82%	97%	33%	73%
20	817	80%	81%	88%	36%	65%
21	324	94%	92%	97%	41%	65%
22	505	86%	83%	91%	52%	55%
TOTAL	9253					
MEAN	421	87%	82%	92%	41%	65%
S.D.	197	6%	9%	4%	11%	16%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans
in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	War Zone Service	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation By DD214
1	BOSTON HCS: Boston	PCT	132	79%	70%	86%	41%	55%
1	BOSTON HCS: Brockton	PCT	63	84%	84%	87%	58%	78%
1	BOSTON HCS: Brockton	SUPT	27	100%	96%	100%	37%	93%
1	CT HCS: West Haven	PCT	140	76%	74%	84%	21%	35%
1	CT HCS: West Haven	SUPT	54	87%	85%	100%	91%	35%
1	MANCHESTER	PCT	73	89%	93%	97%	14%	86%
1	PROVIDENCE	PCT	70	70%	86%	93%	50%	26%
1	WHITE RIVER JUNCTION	PCT	19	95%	89%	89%	32%	79%
2	CANANDAIGUA	PCT	172	66%	59%	87%	56%	92%
2	WESTERN NY HCS: Batavia	PCT	12	92%	92%	100%	33%	92%
3	BRONX	PCT	63	90%	79%	86%	19%	63%
3	NJ HCS: East Orange	PCT	80	86%	84%	84%	96%	3%
3	NY Harbor HCS: Brooklyn	PCT	199	92%	83%	93%	35%	19%
3	NY Harbor HCS: New York	PCT	81	89%	85%	91%	38%	86%
4	COATESVILLE	PCT	41	78%	61%	88%	68%	95%
4	PHILADELPHIA	PCT	50	98%	96%	100%	51%	42%
4	PITTSBURGH HCS: Highland Drive	PCT	98	95%	77%	87%	25%	52%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	98%	83%	90%	94%	71%
5	MD HCS: Baltimore	PCT	110	68%	62%	91%	62%	69%
5	MD HCS: Perry Point	PCT	24	67%	54%	96%	63%	67%
5	WASHINGTON DC	PCT	104	99%	93%	97%	28%	21%
6	ASHEVILLE	PCT	9	89%	100%	100%	11%	89%
6	DURHAM	PCT	163	83%	88%	94%	25%	25%
6	HAMPTON	PCT	129	80%	93%	94%	64%	70%
6	SALISBURY	PCT	156	89%	54%	74%	28%	8%
7	ATLANTA	PCT	61	89%	77%	93%	21%	82%
7	AUGUSTA	PCT	95	92%	96%	100%	11%	6%
7	BIRMINGHAM	PCT	108	94%	84%	92%	39%	65%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	89%	97%	100%	42%	65%
7	CHARLESTON	PCT	133	93%	61%	77%	38%	15%
7	DUBLIN	PCT	75	95%	97%	100%	47%	93%
7	TUSCALOOSA	PCT	64	94%	98%	98%	41%	100%
8	BAY PINES	SUPT	237	93%	67%	86%	47%	65%
8	MIAMI	PCT	52	87%	85%	96%	31%	100%
8	NORTH FL/SOUTH GA HS: Gainesville	PCT	49	84%	82%	90%	20%	94%
8	SAN JUAN	PCT	44	98%	84%	98%	2%	30%
8	TAMPA	PCT	92	91%	45%	83%	54%	38%
9	LEXINGTON	PCT	45	96%	100%	100%	7%	73%
9	LOUISVILLE	PCT	26	73%	77%	92%	35%	96%
9	MEMPHIS	PCT	67	97%	96%	97%	55%	96%
9	MOUNTAIN HOME	PCT	122	98%	94%	100%	70%	80%
10	BRECKSVILLE	PCT	63	94%	97%	100%	38%	100%
10	CHILLICOTHE	PCT	116	90%	100%	100%	20%	100%
10	CINCINNATI	PCT	71	89%	54%	61%	20%	73%
10	COLUMBUS	PCT	164	95%	96%	100%	9%	84%
11	ANN ARBOR	PCT	26	88%	50%	73%	50%	38%
11	BATTLE CREEK	PCT	47	96%	89%	96%	47%	55%
11	DANVILLE	PCT	145	91%	81%	89%	40%	98%
11	NORTHERN IN HCS: Marion	PCT	14	86%	100%	100%	64%	86%

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans
in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	War Zone Service	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation By DD214
12	CHICAGO HCS: West Side	PCT	130	95%	98%	98%	68%	76%
12	HINES	PCT	41	93%	100%	100%	61%	73%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	77%	74%	83%	68%	97%
13	MINNEAPOLIS	PCT	110	85%	65%	85%	37%	64%
13	SIOUX FALLS	PCT	23	87%	100%	100%	74%	83%
14	CENTRAL IA HCS: Knoxville	PCT	26	96%	58%	88%	32%	96%
14	IOWA CITY	PCT	80	85%	74%	90%	26%	99%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	90%	95%	100%	35%	35%
14	NE-WESTERN IA HCS: Omaha	PCT	63	84%	90%	97%	33%	65%
15	EASTERN KS HCS: Topeka	PCT	59	88%	95%	98%	36%	69%
15	KANSAS CITY	PCT	109	82%	78%	89%	60%	74%
15	POPLAR BLUFF	PCT	49	100%	100%	100%	12%	100%
15	ST. LOUIS	PCT	161	97%	88%	88%	19%	30%
15	WICHITA	PCT	68	66%	79%	88%	39%	72%
16	FAYETTEVILLE	PCT	78	91%	79%	97%	22%	63%
16	GULF COAST HCS: Biloxi	PCT	140	96%	94%	96%	24%	91%
16	HOUSTON	PCT	181	82%	49%	73%	23%	51%
16	JACKSON	PCT	95	94%	67%	93%	19%	36%
16	NEW ORLEANS	PCT	74	100%	100%	100%	22%	82%
16	NEW ORLEANS	SUPT	51	90%	96%	100%	96%	84%
16	OKLAHOMA CITY	PCT	81	93%	80%	99%	38%	96%
17	CENTRAL TX VETERANS HCS: Temple	PCT	365	85%	95%	95%	47%	17%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	87%	76%	79%	26%	95%
17	NORTH TX HCS: Dallas	PCT	92	89%	90%	91%	54%	86%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	89%	87%	95%	44%	94%
18	EL PASO	PCT	135	87%	67%	96%	30%	56%
18	NM HCS: Albuquerque	PCT	225	84%	85%	96%	40%	57%
18	PHOENIX	PCT	129	83%	97%	98%	34%	48%
18	SOUTHERN AZ HCS: Tucson	PCT	143	77%	73%	80%	19%	35%
19	CHEYENNE	PCT	34	88%	74%	94%	26%	91%
19	GRAND JUNCTION	PCT	198	91%	80%	97%	46%	88%
19	SALT LAKE CITY	PCT	118	94%	88%	97%	13%	43%
20	BOISE	PCT	91	76%	66%	81%	44%	52%
20	PORTLAND	PCT	310	79%	73%	79%	25%	97%
20	PUGET SOUND HCS: American Lake	PCT	205	87%	93%	97%	51%	66%
20	PUGET SOUND HCS: Seattle	PCT	211	77%	86%	97%	31%	20%
21	HI: Honolulu	PCT	37	84%	76%	92%	24%	84%
21	NORTHERN CA HCS	PCT	100	94%	100%	100%	46%	96%
21	PALO ALTO HCS: San Jose	PCT	48	98%	83%	96%	25%	25%
21	SAN FRANCISCO	PCT	110	95%	92%	95%	34%	49%
21	SAN FRANCISCO	SUPT	29	93%	97%	100%	100%	62%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	95%	76%	88%	51%	78%
22	GREATER LOS ANGELES HCS: West LA	PCT	197	81%	82%	90%	65%	62%
22	LOMA LINDA	PCT	30	100%	93%	97%	53%	77%
22	SAN DIEGO	PCT	237	86%	84%	92%	41%	42%
TOTAL			9253					
MEAN			98	88%	83%	93%	40%	66%
S.D.			67	8%	14%	8%	21%	27%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-3. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs and Program Operations, by VISN: FY 2000.

VISN	N	Prior Psych Treatment	Prior Spec. PTSD Treatment	#PSFs Per FTEE	%PSFs/New Veterans Treated
1	589	80%	22%	17.8	54%
2	184	85%	29%	24.5	46%
3	424	64%	17%	22.0	74%
4	244	69%	16%	13.0	45%
5	240	78%	22%	16.9	43%
6	482	77%	14%	35.4	111%
7	689	74%	29%	28.7	84%
8	475	79%	30%	19.4	91%
9	262	72%	15%	20.8	62%
10	418	61%	11%	16.5	54%
11	236	72%	16%	15.1	63%
12	171	80%	38%	17.3	73%
13	235	78%	21%	12.0	83%
14	193	76%	20%	15.7	85%
15	446	78%	22%	19.8	86%
16	701	67%	15%	14.7	55%
17	686	78%	17%	32.5	92%
18	671	63%	20%	33.6	94%
19	361	80%	34%	30.1	69%
20	819	80%	29%	23.1	56%
21	326	65%	21%	13.6	42%
22	510	81%	28%	26.0	79%
TOTAL	9362				
MEAN	426	74%	22%	21.3	70%
S.D.	198	7%	7%	7.1	19%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-4. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment	#PSFs Per FTEE	% PSFs/New Veterans Treated*
1	BOSTON HCS: Boston	PCT	141	85%	20%	36.7	85%
1	BOSTON HCS: Brockton	PCT	63	89%	32%	20.9	45%
1	BOSTON HCS: Brockton	SUPT	27	81%	15%	11.7	93%
1	CT HCS: West Haven	PCT	140	67%	21%	25.7	97%
1	CT HCS: West Haven	SUPT	54	89%	43%	9.2	96%
1	MANCHESTER	PCT	73	89%	16%	29.1	67%
1	PROVIDENCE	PCT	72	71%	17%	11.1	41%
1	WHITE RIVER JUNCTION	PCT	19	84%	16%	5.3	15%
2	CANANDAIGUA	PCT	172	86%	30%	33.7	62%
2	WESTERN NY HCS: Batavia	PCT	12	58%	17%	5.0	6%
3	BRONX	PCT	64	57%	16%	10.8	60%
3	NJ HCS: East Orange	PCT	81	66%	19%	28.8	66%
3	NY HARBOR HCS: Brooklyn	PCT	198	66%	17%	41.3	117%
3	NY HARBOR HCS: New York	PCT	81	65%	20%	13.9	60%
4	COATESVILLE	PCT	41	78%	34%	7.7	45%
4	PHILADELPHIA	PCT	50	60%	14%	8.2	38%
4	PITTSBURGH HCS: Highland Drive	PCT	101	57%	6%	22.9	68%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	92%	21%	18.2	91%
5	MD HCS: Baltimore	PCT	110	71%	16%	27.0	54%
5	MD HCS: Perry Point	PCT	24	83%	25%	7.4	18%
5	WASHINGTON DC	PCT	106	83%	28%	15.5	73%
6	ASHEVILLE	PCT	9	89%	0%	7.0	113%
6	DURHAM	PCT	184	71%	16%	38.6	93%
6	HAMPTON	PCT	133	75%	8%	28.8	80%
6	SALISBURY	PCT	156	84%	18%	53.2	240%
7	ATLANTA	PCT	61	70%	15%	20.8	53%
7	AUGUSTA	PCT	89	95%	83%	25.1	**
7	BIRMINGHAM	PCT	108	63%	21%	35.9	76%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	81%	22%	43.8	164%
7	CHARLESTON	PCT	133	56%	7%	48.2	119%
7	DUBLIN	PCT	75	82%	27%	13.6	56%
7	TUSCALOOSA	PCT	64	73%	42%	24.5	37%
8	BAY PINES	SUPT	238	78%	35%	25.1	129%
8	MIAMI	PCT	52	87%	27%	16.8	67%
8	No.FL/So.GA HCS/GAINESVILLE	PCT	49	78%	33%	12.0	52%
8	SAN JUAN	PCT	44	86%	18%	11.0	110%
8	TAMPA	PCT	92	76%	20%	24.1	77%
9	LEXINGTON	PCT	45	62%	11%	13.2	47%
9	LOUISVILLE	PCT	26	58%	19%	13.5	38%
9	MEMPHIS	PCT	68	79%	22%	25.9	50%
9	MOUNTAIN HOME	PCT	123	74%	11%	26.5	100%
10	BRECKSVILLE	PCT	63	71%	10%	5.3	30%
10	CHILLICOTHE	PCT	116	28%	0%	29.7	127%
10	CINCINNATI	PCT	75	54%	15%	9.8	39%
10	COLUMBUS	PCT	164	84%	16%	84.1	84%
11	ANN ARBOR	PCT	29	81%	23%	7.7	57%
11	BATTLE CREEK	PCT	47	87%	17%	7.9	27%
11	DANVILLE	PCT	146	66%	13%	51.6	134%
11	NORTHERN IN HCS: Marion	PCT	14	79%	21%	4.7	27%

Table 2-4. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment	#PSFs Per FTEE	%PSFs/New Veterans Treated*
12	CHICAGO HCS: West Side	PCT	130	80%	42%	22.3	107%
12	HINES	PCT	41	80%	24%	10.0	35%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	81%	14%	21.2	103%
13	MINNEAPOLIS	PCT	110	75%	27%	8.6	72%
13	SIOUX FALLS	PCT	23	78%	26%	11.8	79%
14	CENTRAL IA HCS: Knoxville	PCT	26	77%	4%	28.3	433%
14	IOWA CITY	PCT	84	68%	16%	16.0	81%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	95%	15%	8.6	57%
14	NE-WESTERN IA HCS: Omaha	PCT	63	79%	32%	16.5	115%
15	EASTERN KS HCS: Topeka	PCT	59	85%	31%	9.2	67%
15	KANSAS CITY	PCT	109	81%	17%	29.2	103%
15	POPLAR BLUFF	PCT	49	86%	18%	17.4	67%
15	ST. LOUIS	PCT	161	78%	29%	34.2	113%
15	WICHITA	PCT	68	65%	13%	14.1	67%
16	FAYETTEVILLE	PCT	78	52%	13%	16.2	39%
16	GULF COAST HCS: Biloxi	PCT	141	73%	19%	36.1	114%
16	HOUSTON	PCT	181	63%	9%	9.0	64%
16	JACKSON	PCT	95	81%	31%	19.6	64%
16	NEW ORLEANS	PCT	74	58%	16%	12.8	20%
16	NEW ORLEANS	SUPT	51	80%	10%	13.9	100%
16	OKLAHOMA CITY	PCT	81	65%	9%	17.4	54%
17	CENTRAL TX VETERANS HCS: Temple	PCT	363	84%	20%	61.0	146%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	64%	24%	7.5	68%
17	NORTH TX HCS: Dallas	PCT	92	68%	10%	21.1	47%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	75%	13%	34.0	75%
18	EL PASO	PCT	135	61%	24%	33.7	75%
18	NM HCS: Albuquerque	PCT	225	54%	12%	27.5	91%
18	PHOENIX	PCT	167	67%	40%	33.3	112%
18	SOUTHERN AZ HCS: Tucson	PCT	144	73%	12%	51.2	97%
19	CHEYENNE	PCT	34	71%	21%	16.7	131%
19	GRAND JUNCTION	PCT	198	94%	47%	100.5	204%
19	SALT LAKE CITY	PCT	129	59%	16%	16.1	48%
20	BOISE	PCT	91	80%	44%	15.1	58%
20	PORTLAND	PCT	309	81%	29%	45.9	56%
20	PUGET SOUND HCS: American Lake	PCT	208	81%	32%	(see below)	57%
20	PUGET SOUND HCS: Seattle	PCT	211	77%	21%	18.5	44%
21	HONOLULU	PCT	37	56%	8%	9.6	36%
21	NORTHERN CA HCS	PCT	101	60%	15%	21.0	87%
21	PALO ALTO HCS: San Jose	PCT	48	63%	15%	14.6	27%
21	SAN FRANCISCO	PCT	111	69%	31%	12.9	37%
21	SAN FRANCISCO	SUPT	29	86%	34%	8.3	138%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	73%	24%	11.4	87%
22	GREATER LOS ANGELES HCS: West LA	PCT	199	82%	24%	20.4	92%
22	LOMA LINDA	PCT	30	80%	30%	24.6	79%
22	SAN DIEGO	PCT	240	80%	31%	48.0	99%
TOTAL			9362				
MEAN			100	74%	21%	22.8	80%
S.D.			68	12%	12%	16.4	54%

*Percentages greater than 100% represent submission of PSFs on veterans who are not new veterans treated.

**Incorrect stop code used generated no data for new veterans treated.

Table 2-5. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	N	Age	High School Education Or More	Not Working	Violent Behavior
1	578	53.2	89%	64%	26%
2	184	51.0	86%	82%	24%
3	423	53.8	87%	68%	23%
4	241	53.3	89%	67%	21%
5	238	52.5	91%	63%	41%
6	457	52.7	88%	64%	24%
7	695	52.7	92%	72%	41%
8	474	54.0	89%	76%	26%
9	260	54.0	76%	72%	28%
10	414	52.3	94%	69%	15%
11	232	54.1	88%	66%	31%
12	171	53.3	87%	73%	33%
13	235	51.8	91%	59%	21%
14	189	53.8	89%	58%	11%
15	446	53.5	87%	69%	26%
16	700	53.4	87%	67%	26%
17	688	52.5	87%	66%	36%
18	632	53.9	89%	65%	22%
19	350	53.9	88%	64%	26%
20	817	51.3	91%	67%	27%
21	324	54.0	94%	67%	19%
22	505	53.1	84%	78%	26%
TOTAL	9253				
MEAN	421	53.1	88%	68%	26%
S.D.	197	0.9	4%	6%	7%

Table 2-6. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	STATION NAME	Program	N	Age	High School Education Or More	Not Working	Violent Behavior
1	BOSTON HCS: Boston	PCT	132	53.9	92%	58%	14%
1	BOSTON HCS: Brockton	PCT	63	52.0	89%	62%	13%
1	BOSTON HCS: Brockton	SUPT	27	54.6	81%	52%	48%
1	CT HCS: West Haven	PCT	140	53.5	91%	64%	16%
1	CT HCS: West Haven	SUPT	54	52.3	93%	72%	20%
1	MANCHESTER	PCT	73	53.5	88%	63%	90%
1	PROVIDENCE	PCT	70	52.7	86%	71%	13%
1	WHITE RIVER JUNCTION	PCT	19	50.8	89%	68%	11%
2	CANANDAIGUA	PCT	172	50.8	86%	83%	24%
2	WESTERN NY HCS: Batavia	PCT	12	53.8	83%	67%	17%
3	BRONX	PCT	63	52.8	87%	71%	41%
3	NJ HCS: East Orange	PCT	80	54.2	89%	63%	8%
3	NY HARBOR HCS: Brooklyn	PCT	199	54.0	86%	67%	15%
3	NY HARBOR HCS: New York	PCT	81	53.7	86%	74%	44%
4	COATESVILLE	PCT	41	50.8	90%	78%	29%
4	PHILADELPHIA	PCT	50	53.2	94%	56%	18%
4	PITTSBURGH HCS: Highland Drive	PCT	98	55.3	85%	55%	12%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	51.3	90%	90%	33%
5	MD HCS: Baltimore	PCT	110	51.1	89%	64%	45%
5	MD HCS: Perry Point	PCT	24	50.2	96%	63%	50%
5	WASHINGTON DC	PCT	104	54.4	91%	62%	35%
6	ASHEVILLE	PCT	9	55.1	56%	100%	44%
6	DURHAM	PCT	163	53.8	90%	62%	41%
6	HAMPTON	PCT	129	50.2	89%	67%	15%
6	SALISBURY	PCT	156	53.6	86%	62%	11%
7	ATLANTA	PCT	61	51.8	93%	70%	50%
7	AUGUSTA	PCT	95	54.9	89%	93%	40%
7	BIRMINGHAM	PCT	108	52.6	95%	66%	58%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	51.4	89%	73%	50%
7	CHARLESTON	PCT	133	52.7	99%	55%	16%
7	DUBLIN	PCT	75	54.3	84%	77%	15%
7	TUSCALOOSA	PCT	64	51.9	89%	77%	66%
8	BAY PINES	SUPT	237	53.8	91%	78%	25%
8	GAINESVILLE	PCT	49	54.3	90%	81%	21%
8	MIAMI	PCT	52	53.5	90%	73%	13%
8	SAN JUAN	PCT	44	54.3	93%	70%	14%
8	TAMPA	PCT	92	54.5	82%	74%	43%
9	LEXINGTON	PCT	45	54.0	73%	74%	9%
9	LOUISVILLE	PCT	26	47.9	88%	77%	38%
9	MEMPHIS	PCT	67	55.6	79%	72%	21%
9	MOUNTAIN HOME	PCT	122	54.5	72%	71%	37%
10	BRECKSVILLE	PCT	63	55.2	86%	73%	22%
10	CHILLICOTHE	PCT	116	54.6	100%	78%	0%
10	CINCINNATI	PCT	71	42.2	93%	39%	26%
10	COLUMBUS	PCT	164	54.1	93%	74%	19%
11	ANN ARBOR	PCT	26	50.8	81%	70%	13%
11	BATTLE CREEK	PCT	47	53.5	91%	74%	9%
11	DANVILLE	PCT	145	55.3	87%	65%	44%
11	NORTHERN IN HCS: Marion	PCT	14	49.8	100%	43%	0%

Table 2-6. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	STATION NAME	Program	N	Age	High School Education Or More	Not Working	Violent Behavior
12	CHICAGO HCS: West Side	PCT	130	52.9	85%	77%	35%
12	HINES	PCT	41	54.6	93%	59%	29%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	51.4	94%	57%	19%
13	MINNEAPOLIS	PCT	110	52.0	87%	62%	10%
13	SIOUX FALLS	PCT	23	52.9	96%	57%	87%
14	CENTRAL IA HCS: Knoxville	PCT	26	56.9	88%	42%	4%
14	IOWA CITY	PCT	80	52.5	93%	58%	13%
14	NE-WESTERN IA HCS: Omaha	PCT	63	54.4	84%	63%	6%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	53.2	90%	60%	30%
15	GREATER EASTERN KS HCS: Topeka	PCT	59	51.6	95%	64%	38%
15	KANSAS CITY	PCT	109	56.7	83%	72%	14%
15	POPLAR BLUFF	PCT	49	57.1	73%	80%	35%
15	ST. LOUIS	PCT	161	51.6	92%	67%	33%
15	WICHITA	PCT	68	52.0	87%	66%	14%
16	FAYETTEVILLE	PCT	78	52.3	88%	57%	13%
16	GULF COAST HCS: Biloxi	PCT	140	55.4	83%	74%	68%
16	HOUSTON	PCT	181	51.3	92%	61%	22%
16	JACKSON	PCT	95	55.2	84%	71%	13%
16	NEW ORLEANS	PCT	74	54.3	84%	57%	7%
16	NEW ORLEANS	SUPT	51	51.5	78%	75%	14%
16	OKLAHOMA CITY	PCT	81	53.7	89%	75%	14%
17	CENTRAL TX VETERANS HCS: Temple	PCT	365	51.5	87%	73%	40%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	50.3	89%	59%	43%
17	NORTH TX HCS: Dallas	PCT	92	55.9	87%	54%	22%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	53.3	87%	59%	33%
18	EL PASO	PCT	135	55.3	90%	61%	25%
18	NM HCS: Albuquerque	PCT	225	55.0	85%	63%	11%
18	PHOENIX	PCT	129	52.1	91%	71%	31%
18	SOUTHERN AZ HCS: Tucson	PCT	143	52.6	93%	66%	31%
19	CHEYENNE	PCT	34	52.3	79%	71%	35%
19	GRAND JUNCTION	PCT	198	54.2	88%	69%	27%
19	SALT LAKE CITY	PCT	118	53.7	92%	53%	21%
20	BOISE	PCT	91	50.5	93%	58%	34%
20	PORTLAND	PCT	310	51.5	91%	66%	28%
20	PUGET SOUND HCS: American Lake	PCT	205	51.0	94%	75%	20%
20	PUGET SOUND HCS: Seattle	PCT	211	51.4	89%	64%	28%
21	HI: Honolulu	PCT	37	51.5	84%	68%	14%
21	NORTHERN CA HCS	PCT	100	53.3	97%	79%	13%
21	PALO ALTO HCS: San Jose	PCT	48	56.6	96%	52%	31%
21	SAN FRANCISCO	PCT	110	54.6	93%	57%	18%
21	SAN FRANCISCO	SUPT	29	53.3	100%	93%	36%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	55.4	2%	83%	34%
22	GREATER LOS ANGELES HCS: West LA	PCT	197	53.4	91%	82%	19%
22	LOMA LINDA	PCT	30	53.7	87%	77%	28%
22	SAN DIEGO	PCT	237	52.4	92%	74%	30%
TOTAL			9253				
MEAN			98	53.1	88%	68%	27%
S.D.			67	2.1	11%	11%	17%

Table 2-7. Critical Monitors: Summary of Outliers for Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	# of Progs.	War Zone Service	PTSD Clinical Diagnosis	Subs. Abuse Dx	Valid. by DD214	Prior Psych. Tx	Prior Spec. PTSD Tx	#PSFs Per FTEE	%PSFs Per New Veteran Treated	Total # of Outliers	Mean # Outliers/Program
1	8	3		1	3	3	1	1	1	13	1.6
2	2	1	1			1		1	1	5	2.5
3	4			1	2					3	0.8
4	4	1	1			1	1			4	1.0
5	3	2	2		1				1	6	2.0
6	4	1	1	1	2	1				6	1.5
7	7		1	1	2	1	2			7	1.0
8	5		2	1	2	2	2			9	1.8
9	4	1		1						2	0.5
10	4		1	1				1		3	0.8
11	4		1		1		1	1		4	1.0
12	2					1				1	0.5
13	3	1	1							2	0.7
14	4		1		1	1				3	0.8
15	5	1		2	1	1				5	1.0
16	7		2	1	1				1	5	0.7
17	4				1					1	0.3
18	4	1	1	1	1		1			5	1.3
19	3			1		1	1			3	1.0
20	4	3	1		1		1			6	1.5
21	5				1	1	1			3	0.6
22	4									0	0.0
TOTAL	94	15	16	12	20	14	11	4	4	96	1.0
MEAN											0.6
S.D.											

Boxed cell signifies an outlier in the undesirable direction.

Table 2-8. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	N	Male	Married	Separated or Divorced	Never Married
1	578	95%	49%	37%	12%
2	184	93%	36%	45%	15%
3	423	97%	45%	33%	18%
4	241	100%	51%	40%	7%
5	238	98%	41%	44%	14%
6	457	99%	51%	38%	8%
7	695	99%	57%	35%	5%
8	474	98%	49%	41%	7%
9	260	99%	64%	30%	4%
10	414	97%	56%	35%	6%
11	232	99%	48%	39%	10%
12	171	99%	40%	43%	12%
13	235	89%	56%	35%	6%
14	189	95%	53%	37%	9%
15	446	98%	58%	35%	5%
16	700	98%	57%	35%	6%
17	688	94%	54%	39%	6%
18	632	95%	55%	35%	9%
19	350	97%	60%	34%	5%
20	817	93%	48%	41%	9%
21	324	96%	46%	41%	10%
22	505	95%	36%	47%	14%
TOTAL	9253				
MEAN	421	96%	50%	38%	9%
S.D.	197	3%	7%	4%	4%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs, FY 2000.

VISN	STATION NAME	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
1	BOSTON HCS: Boston	PCT	132	99%	48%	34%	15%
1	BOSTON HCS: Brockton	PCT	63	92%	38%	43%	16%
1	BOSTON HCS: Brockton	SUPT	27	100%	48%	33%	11%
1	CT HCS: West Haven	PCT	140	96%	54%	33%	12%
1	CT HCS: West Haven	SUPT	54	98%	28%	59%	13%
1	MANCHESTER	PCT	73	97%	60%	32%	7%
1	PROVIDENCE	PCT	70	83%	52%	35%	10%
1	WHITE RIVER JUNCTION	PCT	19	95%	58%	42%	0%
2	CANANDAIGUA	PCT	172	92%	33%	47%	16%
2	WESTERN NY HCS: Batavia	PCT	12	100%	83%	17%	0%
3	BRONX	PCT	63	100%	46%	33%	19%
3	NJ HCS: East Orange	PCT	80	95%	48%	31%	20%
3	NY HARBOR HCS: Brooklyn	PCT	199	98%	47%	35%	13%
3	NY HARBOR HCS: New York	PCT	81	95%	39%	27%	28%
4	COATESVILLE	PCT	41	100%	27%	59%	10%
4	PHILADELPHIA	PCT	50	100%	52%	36%	6%
4	PITTSBURGH HCS: Highland Drive	PCT	98	100%	65%	30%	5%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	100%	42%	48%	10%
5	MD HCS: Baltimore	PCT	110	95%	36%	46%	17%
5	MD HCS: Perry Point	PCT	24	100%	25%	63%	13%
5	WASHINGTON DC	PCT	104	100%	50%	38%	11%
6	ASHEVILLE	PCT	9	100%	78%	22%	0%
6	DURHAM	PCT	163	98%	58%	34%	6%
6	HAMPTON	PCT	129	98%	38%	48%	12%
6	SALISBURY	PCT	156	100%	53%	36%	7%
7	ATLANTA	PCT	61	95%	56%	31%	11%
7	AUGUSTA	PCT	95	99%	63%	32%	3%
7	BIRMINGHAM	PCT	108	99%	59%	35%	4%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	98%	56%	36%	7%
7	CHARLESTON	PCT	133	99%	58%	34%	5%
7	DUBLIN	PCT	75	100%	53%	37%	4%
7	TUSCALOOSA	PCT	64	98%	50%	47%	3%
8	BAY PINES	SUPT	237	99%	46%	45%	6%
8	GAINESVILLE	PCT	49	96%	59%	37%	4%
8	MIAMI	PCT	52	92%	40%	38%	17%
8	SAN JUAN	PCT	44	100%	75%	18%	5%
8	TAMPA	PCT	92	97%	45%	47%	5%
9	LEXINGTON	PCT	45	100%	80%	18%	2%
9	LOUISVILLE	PCT	26	96%	38%	58%	4%
9	MEMPHIS	PCT	67	100%	52%	37%	7%
9	MOUNTAIN HOME	PCT	122	99%	70%	25%	3%
10	BRECKSVILLE	PCT	63	98%	56%	29%	8%
10	CHILLICOTHE	PCT	116	99%	50%	40%	6%
10	CINCINNATI	PCT	71	86%	58%	32%	10%
10	COLUMBUS	PCT	164	100%	59%	35%	4%
11	ANN ARBOR	PCT	26	100%	48%	32%	20%
11	BATTLE CREEK	PCT	47	100%	45%	49%	6%
11	DANVILLE	PCT	145	99%	50%	35%	10%
11	NORTHERN IN HCS: Marion	PCT	14	100%	29%	64%	7%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs, FY 2000.

VISN	STATION NAME	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
12	CHICAGO HCS: West Side	PCT	130	99%	35%	47%	12%
12	HINES	PCT	41	98%	54%	29%	10%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	86%	54%	37%	6%
13	MINNEAPOLIS	PCT	110	89%	52%	37%	8%
13	SIOUX FALLS	PCT	23	100%	83%	17%	0%
14	CENTRAL IA HCS: Knoxville	PCT	26	100%	69%	27%	4%
14	IOWA CITY	PCT	80	93%	51%	33%	13%
14	NE-WESTERN IA HCS: Omaha	PCT	63	94%	52%	40%	6%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	100%	40%	55%	5%
15	GREATER EASTERN KS HCS: Topeka	PCT	59	100%	61%	32%	3%
15	KANSAS CITY	PCT	109	97%	57%	33%	8%
15	POPLAR BLUFF	PCT	49	100%	76%	20%	4%
15	ST. LOUIS	PCT	161	98%	57%	38%	4%
15	WICHITA	PCT	68	94%	49%	43%	4%
16	FAYETTEVILLE	PCT	78	94%	65%	27%	5%
16	GULF COAST HCS: Biloxi	PCT	140	99%	58%	37%	3%
16	HOUSTON	PCT	181	96%	53%	39%	7%
16	JACKSON	PCT	95	96%	68%	28%	3%
16	NEW ORLEANS	PCT	74	100%	65%	27%	5%
16	NEW ORLEANS	SUPT	51	100%	27%	53%	12%
16	OKLAHOMA CITY	PCT	81	100%	56%	35%	6%
17	CENTRAL TX VETERANS HCS: Temple	PCT	365	93%	44%	47%	6%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	100%	61%	37%	3%
17	NORTH TX HCS: Dallas	PCT	92	99%	63%	32%	5%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	92%	65%	26%	6%
18	EL PASO	PCT	135	87%	63%	29%	7%
18	NM HCS: Albuquerque	PCT	225	98%	52%	40%	6%
18	PHOENIX	PCT	129	98%	46%	38%	16%
18	SOUTHERN AZ HCS: Tucson	PCT	143	92%	58%	32%	8%
19	CHEYENNE	PCT	34	97%	38%	50%	9%
19	GRAND JUNCTION	PCT	198	97%	59%	36%	4%
19	SALT LAKE CITY	PCT	118	96%	67%	26%	5%
20	BOISE	PCT	91	97%	65%	30%	4%
20	PORTLAND	PCT	310	97%	49%	40%	9%
20	PUGET SOUND HCS: American Lake	PCT	205	93%	45%	45%	7%
20	PUGET SOUND HCS: Seattle	PCT	211	85%	40%	43%	12%
21	HI: Honolulu	PCT	37	92%	62%	22%	14%
21	NORTHERN CA HCS	PCT	100	95%	52%	43%	5%
21	PALO ALTO HCS: San Jose	PCT	48	100%	48%	35%	10%
21	SAN FRANCISCO	PCT	110	97%	45%	40%	12%
21	SAN FRANCISCO	SUPT	29	97%	7%	71%	18%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	100%	39%	27%	24%
22	GREATER LOS ANGELES HCS: West LA	PCT	197	93%	23%	57%	16%
22	LOMA LINDA	PCT	30	100%	62%	24%	14%
22	SAN DIEGO	PCT	237	95%	44%	45%	10%
TOTAL			9253				
MEAN			98	97%	52%	37%	9%
S.D.			67	4%	13%	11%	5%

Table 2-10. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	N	Caucasian	African-American	Hispanic	Other
1	578	83%	12%	4%	1%
2	184	77%	18%	2%	3%
3	423	43%	38%	17%	2%
4	241	72%	24%	2%	2%
5	238	35%	64%	0%	0%
6	457	49%	47%	2%	2%
7	695	53%	44%	1%	3%
8	474	71%	12%	16%	1%
9	260	86%	11%	1%	2%
10	414	85%	14%	0%	0%
11	232	89%	9%	1%	0%
12	171	27%	69%	3%	1%
13	235	84%	4%	1%	11%
14	189	89%	6%	2%	3%
15	446	74%	20%	2%	4%
16	700	59%	34%	5%	2%
17	688	54%	22%	23%	1%
18	632	53%	6%	35%	6%
19	350	89%	1%	8%	1%
20	817	81%	10%	3%	6%
21	324	66%	14%	8%	12%
22	505	50%	31%	12%	7%
TOTAL	9253				
MEAN	421	67%	23%	7%	3%
S.D.	197	19%	19%	9%	3%

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	Caucasian	African American	Hispanic	Other
1	BOSTON HCS: Boston	PCT	132	76%	17%	5%	2%
1	BOSTON HCS: Brockton	PCT	63	83%	13%	3%	2%
1	BOSTON HCS: Brockton	SUPT	27	93%	0%	7%	0%
1	CT HCS: West Haven	PCT	140	81%	15%	4%	0%
1	CT HCS: West Haven	SUPT	54	72%	20%	7%	0%
1	MANCHESTER	PCT	73	99%	1%	0%	0%
1	PROVIDENCE	PCT	70	91%	6%	3%	0%
1	WHITE RIVER JUNCTION	PCT	19	84%	0%	5%	11%
2	CANANDAIGUA	PCT	172	76%	19%	2%	3%
2	WESTERN NY HCS: Batavia	PCT	12	83%	17%	0%	0%
3	BRONX	PCT	63	32%	33%	33%	2%
3	NJ HCS: East Orange	PCT	80	46%	41%	11%	1%
3	NY HARBOR HCS: Brooklyn	PCT	199	51%	37%	11%	1%
3	NY HARBOR HCS: New York	PCT	81	31%	40%	22%	7%
4	COATESVILLE	PCT	41	56%	37%	5%	2%
4	PHILADELPHIA	PCT	50	54%	42%	2%	2%
4	PITTSBURGH HCS: Highland Drive	PCT	98	87%	11%	0%	2%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	73%	23%	2%	2%
5	MD HCS: Baltimore	PCT	110	49%	51%	0%	0%
5	MD HCS: Perry Point	PCT	24	63%	38%	0%	0%
5	WASHINGTON DC	PCT	104	13%	85%	1%	1%
6	ASHEVILLE	PCT	9	89%	11%	0%	0%
6	DURHAM	PCT	163	37%	56%	4%	3%
6	HAMPTON	PCT	129	31%	66%	2%	1%
6	SALISBURY	PCT	156	73%	24%	0%	3%
7	ATLANTA	PCT	61	43%	54%	2%	2%
7	AUGUSTA	PCT	95	64%	25%	0%	11%
7	BIRMINGHAM	PCT	108	56%	44%	0%	0%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	38%	58%	1%	3%
7	CHARLESTON	PCT	133	55%	41%	0%	4%
7	DUBLIN	PCT	75	59%	40%	1%	0%
7	TUSCALOOSA	PCT	64	64%	34%	0%	2%
8	BAY PINES	SUPT	237	87%	8%	5%	0%
8	GAINESVILLE	PCT	49	82%	12%	4%	2%
8	MIAMI	PCT	52	46%	35%	17%	2%
8	SAN JUAN	PCT	44	2%	0%	98%	0%
8	TAMPA	PCT	92	73%	17%	10%	0%
9	LEXINGTON	PCT	45	96%	2%	0%	2%
9	LOUISVILLE	PCT	26	88%	0%	0%	12%
9	MEMPHIS	PCT	67	67%	30%	1%	1%
9	MOUNTAIN HOME	PCT	122	92%	7%	1%	1%
10	BRECKSVILLE	PCT	63	76%	19%	3%	2%
10	CHILLICOTHE	PCT	116	94%	6%	0%	0%
10	CINCINNATI	PCT	71	70%	30%	0%	0%
10	COLUMBUS	PCT	164	88%	12%	0%	0%
11	ANN ARBOR	PCT	26	92%	4%	0%	4%
11	BATTLE CREEK	PCT	47	72%	23%	4%	0%
11	DANVILLE	PCT	145	95%	5%	0%	0%
11	NORTHERN IN HCS: Marion	PCT	14	79%	21%	0%	0%

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	Caucasian	African American	Hispanic	Other
12	CHICAGO HCS: West Side	PCT	130	14%	82%	4%	1%
12	HINES	PCT	41	68%	29%	2%	0%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	76%	3%	0%	21%
13	MINNEAPOLIS	PCT	110	89%	6%	2%	3%
13	SIOUX FALLS	PCT	23	91%	0%	0%	9%
14	CENTRAL IA HCS: Knoxville	PCT	26	92%	4%	0%	4%
14	IOWA CITY	PCT	80	91%	6%	3%	0%
14	NE-WESTERN IA HCS: Omaha	PCT	63	83%	10%	3%	5%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	95%	0%	0%	5%
15	EASTERN KS HCS: Topeka	PCT	59	76%	17%	3%	3%
15	KANSAS CITY	PCT	109	72%	21%	4%	3%
15	POPLAR BLUFF	PCT	49	96%	2%	0%	2%
15	ST. LOUIS	PCT	161	65%	29%	2%	4%
15	WICHITA	PCT	68	82%	13%	0%	4%
16	FAYETTEVILLE	PCT	78	92%	3%	3%	3%
16	GULF COAST HCS: Biloxi	PCT	140	69%	29%	1%	1%
16	HOUSTON	PCT	181	46%	36%	17%	2%
16	JACKSON	PCT	95	64%	34%	1%	1%
16	NEW ORLEANS	PCT	74	45%	55%	0%	0%
16	NEW ORLEANS	SUPT	51	27%	71%	2%	0%
16	OKLAHOMA CITY	PCT	81	63%	26%	1%	10%
17	CENTRAL TX VETERANS HCS: Temple	PCT	365	60%	25%	14%	1%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	39%	50%	8%	3%
17	NORTH TX HCS: Dallas	PCT	92	68%	27%	3%	1%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	38%	8%	52%	1%
18	EL PASO	PCT	135	33%	5%	59%	4%
18	NM HCS: Albuquerque	PCT	225	43%	4%	46%	7%
18	PHOENIX	PCT	129	71%	9%	10%	11%
18	SOUTHERN AZ HCS: Tucson	PCT	143	72%	6%	20%	3%
19	CHEYENNE	PCT	34	79%	9%	12%	0%
19	GRAND JUNCTION	PCT	198	94%	0%	6%	1%
19	SALT LAKE CITY	PCT	118	85%	1%	12%	3%
20	BOISE	PCT	91	92%	0%	4%	3%
20	PORTLAND	PCT	310	86%	5%	3%	5%
20	PUGET SOUND HCS: American Lake	PCT	205	68%	17%	3%	11%
20	PUGET SOUND HCS: Seattle	PCT	211	82%	13%	2%	3%
21	HI: Honolulu	PCT	37	32%	14%	3%	51%
21	NORTHERN CA HCS	PCT	100	81%	4%	10%	5%
21	PALO ALTO HCS: San Jose	PCT	48	63%	10%	15%	13%
21	SAN FRANCISCO	PCT	110	72%	17%	4%	7%
21	SAN FRANCISCO	SUPT	29	41%	41%	10%	7%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	29%	27%	37%	7%
22	GREATER LOS ANGELES HCS: West LA	PCT	197	35%	47%	10%	9%
22	LOMA LINDA	PCT	30	63%	17%	17%	3%
22	SAN DIEGO	PCT	237	65%	20%	9%	5%
TOTAL			9253				
MEAN			98	67%	22%	7%	4%
S.D.			67	22%	19%	14%	6%

Table 2-12. War-Time Service Eras Among Veterans in Specialized
Outpatient PTSD Programs, by VISN: FY 2000.

VISN	N	World War II	Korea	Vietnam	Persian Gulf
1	578	7%	7%	68%	7%
2	184	7%	3%	66%	5%
3	423	7%	5%	76%	6%
4	241	5%	5%	80%	6%
5	238	5%	4%	74%	6%
6	457	5%	3%	77%	9%
7	695	3%	5%	79%	11%
8	474	4%	6%	84%	5%
9	260	6%	4%	82%	8%
10	414	8%	6%	66%	17%
11	232	12%	5%	70%	9%
12	171	2%	4%	90%	1%
13	235	4%	5%	74%	10%
14	189	12%	6%	70%	12%
15	446	7%	4%	78%	8%
16	700	5%	6%	78%	7%
17	688	6%	5%	73%	14%
18	632	9%	6%	72%	11%
19	350	7%	6%	78%	8%
20	817	3%	3%	73%	11%
21	324	6%	4%	83%	4%
22	505	5%	3%	77%	7%
TOTAL	9253				
MEAN	421	6%	5%	76%	8%
S.D.	197	2%	1%	6%	4%

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
1	BOSTON HCS: Boston	PCT	132	8%	9%	66%	5%
1	BOSTON HCS: Brockton	PCT	63	2%	3%	76%	8%
1	BOSTON HCS: Brockton	SUPT	27	7%	4%	89%	0%
1	CT HCS: West Haven	PCT	140	9%	8%	64%	8%
1	CT HCS: West Haven	SUPT	54	4%	6%	80%	4%
1	MANCHESTER	PCT	73	8%	5%	73%	14%
1	PROVIDENCE	PCT	70	10%	7%	53%	7%
1	WHITE RIVER JUNCTION	PCT	19	5%	0%	74%	16%
2	CANANDAIGUA	PCT	172	6%	3%	64%	5%
2	WESTERN NY HCS: Batavia	PCT	12	8%	0%	92%	0%
3	BRONX	PCT	63	6%	3%	70%	13%
3	NJ HCS: East Orange	PCT	80	5%	6%	78%	4%
3	NY HARBOR HCS: Brooklyn	PCT	199	8%	5%	78%	7%
3	NY HARBOR HCS: New York	PCT	81	9%	5%	74%	4%
4	COATESVILLE	PCT	41	5%	0%	80%	5%
4	PHILADELPHIA	PCT	50	4%	6%	76%	12%
4	PITTSBURGH HCS: Highland Drive	PCT	98	7%	8%	78%	4%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	2%	0%	90%	4%
5	MD HCS: Baltimore	PCT	110	5%	3%	65%	6%
5	MD HCS: Perry Point	PCT	24	4%	0%	67%	8%
5	WASHINGTON DC	PCT	104	5%	6%	84%	6%
6	ASHEVILLE	PCT	9	11%	0%	89%	0%
6	DURHAM	PCT	163	7%	3%	74%	8%
6	HAMPTON	PCT	129	1%	3%	74%	15%
6	SALISBURY	PCT	156	6%	3%	81%	7%
7	ATLANTA	PCT	61	2%	3%	84%	7%
7	AUGUSTA	PCT	95	4%	4%	91%	4%
7	BIRMINGHAM	PCT	108	2%	5%	74%	12%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	2%	4%	72%	15%
7	CHARLESTON	PCT	133	5%	6%	75%	15%
7	DUBLIN	PCT	75	3%	8%	81%	5%
7	TUSCALOOSA	PCT	64	2%	2%	84%	13%
8	BAY PINES	SUPT	237	4%	4%	86%	3%
8	GAINESVILLE	PCT	49	4%	4%	80%	6%
8	MIAMI	PCT	52	10%	2%	77%	4%
8	SAN JUAN	PCT	44	0%	14%	77%	9%
8	TAMPA	PCT	92	3%	9%	85%	5%
9	LEXINGTON	PCT	45	2%	4%	89%	2%
9	LOUISVILLE	PCT	26	0%	0%	73%	23%
9	MEMPHIS	PCT	67	10%	0%	84%	4%
9	MOUNTAIN HOME	PCT	122	7%	7%	81%	9%
10	BRECKSVILLE	PCT	63	16%	8%	62%	14%
10	CHILLICOTHE	PCT	116	13%	3%	69%	8%
10	CINCINNATI	PCT	71	0%	1%	31%	65%
10	COLUMBUS	PCT	164	5%	8%	80%	5%
11	ANN ARBOR	PCT	26	8%	0%	77%	12%
11	BATTLE CREEK	PCT	47	6%	9%	74%	9%
11	DANVILLE	PCT	145	15%	6%	66%	9%
11	NORTHERN IN HCS: Marion	PCT	14	0%	0%	79%	7%

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
12	CHICAGO HCS: West Side	PCT	130	2%	3%	92%	1%
12	HINES	PCT	41	5%	7%	80%	2%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	2%	6%	73%	12%
13	MINNEAPOLIS	PCT	110	6%	4%	72%	9%
13	SIOUX FALLS	PCT	23	4%	4%	87%	4%
14	CENTRAL IA HCS: Knoxville	PCT	26	15%	4%	81%	0%
14	IOWA CITY	PCT	80	9%	5%	70%	15%
14	NE-WESTERN IA HCS: Omaha	PCT	63	16%	8%	63%	16%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	5%	10%	75%	5%
15	EASTERN KS HCS: Topeka	PCT	59	2%	2%	83%	15%
15	KANSAS CITY	PCT	109	15%	6%	67%	2%
15	POPLAR BLUFF	PCT	49	16%	0%	82%	0%
15	ST. LOUIS	PCT	161	1%	2%	87%	12%
15	WICHITA	PCT	68	7%	6%	66%	10%
16	FAYETTEVILLE	PCT	78	8%	5%	72%	14%
16	GULF COAST HCS: Biloxi	PCT	140	7%	6%	80%	6%
16	HOUSTON	PCT	181	0%	6%	75%	10%
16	JACKSON	PCT	95	13%	5%	77%	1%
16	NEW ORLEANS	PCT	74	7%	4%	81%	7%
16	NEW ORLEANS	SUPT	51	2%	2%	88%	2%
16	OKLAHOMA CITY	PCT	81	5%	9%	83%	6%
17	CENTRAL TX VETERANS HCS: Temple	PCT	365	4%	4%	73%	15%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	0%	3%	76%	13%
17	NORTH TX HCS: Dallas	PCT	92	10%	5%	82%	4%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	8%	7%	69%	16%
18	EL PASO	PCT	135	10%	9%	70%	10%
18	NM HCS: Albuquerque	PCT	225	12%	6%	70%	11%
18	PHOENIX	PCT	129	5%	3%	78%	14%
18	SOUTHERN AZ HCS: Tucson	PCT	143	6%	5%	71%	11%
19	CHEYENNE	PCT	34	6%	0%	76%	15%
19	GRAND JUNCTION	PCT	198	6%	7%	83%	5%
19	SALT LAKE CITY	PCT	118	10%	6%	71%	13%
20	BOISE	PCT	91	3%	2%	74%	12%
20	PORTLAND	PCT	310	3%	4%	77%	9%
20	PUGET SOUND HCS: American Lake	PCT	205	1%	2%	77%	13%
20	PUGET SOUND HCS: Seattle	PCT	211	6%	5%	62%	13%
21	HI: Honolulu	PCT	37	5%	8%	62%	11%
21	NORTHERN CA HCS	PCT	100	4%	4%	90%	2%
21	PALO ALTO HCS: San Jose	PCT	48	13%	4%	77%	4%
21	SAN FRANCISCO	PCT	110	7%	4%	83%	5%
21	SAN FRANCISCO	SUPT	29	0%	3%	97%	0%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	12%	7%	68%	5%
22	GREATER LOS ANGELES HCS: West LA	PCT	197	5%	2%	80%	1%
22	LOMA LINDA	PCT	30	0%	7%	80%	3%
22	SAN DIEGO	PCT	237	5%	3%	76%	13%
TOTAL			9253				
MEAN			98	6%	4%	76%	9%
S.D.			67	4%	3%	9%	8%

Table 2-14. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
1	578	78%	7%	2%	56%
2	184	67%	4%	5%	53%
3	423	78%	4%	3%	50%
4	241	87%	6%	2%	46%
5	238	75%	7%	4%	42%
6	457	80%	7%	4%	45%
7	695	88%	10%	3%	64%
8	474	85%	16%	3%	62%
9	260	93%	6%	3%	55%
10	414	89%	7%	4%	63%
11	232	88%	9%	6%	51%
12	171	91%	14%	2%	52%
13	235	76%	6%	3%	61%
14	189	85%	6%	4%	57%
15	446	87%	17%	3%	57%
16	700	89%	12%	3%	55%
17	688	83%	4%	2%	65%
18	632	79%	8%	4%	56%
19	350	87%	14%	3%	65%
20	817	76%	9%	2%	66%
21	324	91%	6%	3%	55%
22	505	84%	18%	3%	53%
TOTAL	9253				
MEAN	421	83%	9%	3%	56%
S.D.	197	7%	4%	1%	7%

Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner Of War	Service Connected
1	BOSTON HCS: Boston	PCT	132	73%	8%	1%	47%
1	BOSTON HCS: Brockton	PCT	63	81%	16%	0%	54%
1	BOSTON HCS: Brockton	SUPT	27	100%	0%	0%	59%
1	CT HCS: West Haven	PCT	140	76%	5%	3%	51%
1	CT HCS: West Haven	SUPT	54	83%	13%	2%	54%
1	MANCHESTER	PCT	73	90%	4%	7%	81%
1	PROVIDENCE	PCT	70	66%	0%	0%	61%
1	WHITE RIVER JUNCTION	PCT	19	79%	11%	0%	63%
2	CANANDAIGUA	PCT	172	65%	4%	5%	54%
2	WESTERN NY HCS: Batavia	PCT	12	92%	0%	0%	33%
3	BRONX	PCT	63	89%	0%	6%	49%
3	NJ HCS: East Orange	PCT	80	41%	1%	4%	53%
3	NY HARBOR HCS: Brooklyn	PCT	199	88%	2%	3%	53%
3	NY HARBOR HCS: New York	PCT	81	83%	14%	2%	42%
4	COATESVILLE	PCT	41	76%	2%	2%	32%
4	PHILADELPHIA	PCT	50	90%	2%	0%	40%
4	PITTSBURGH HCS: Highland Drive	PCT	98	89%	7%	2%	51%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	90%	12%	2%	54%
5	MD HCS: Baltimore	PCT	110	61%	5%	5%	33%
5	MD HCS: Perry Point	PCT	24	67%	25%	0%	58%
5	WASHINGTON DC	PCT	104	91%	6%	4%	47%
6	ASHEVILLE	PCT	9	67%	11%	0%	44%
6	DURHAM	PCT	163	82%	13%	6%	47%
6	HAMPTON	PCT	129	80%	3%	2%	47%
6	SALISBURY	PCT	156	79%	3%	3%	42%
7	ATLANTA	PCT	61	87%	5%	0%	75%
7	AUGUSTA	PCT	95	89%	11%	1%	86%
7	BIRMINGHAM	PCT	108	91%	5%	4%	66%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	85%	11%	5%	64%
7	CHARLESTON	PCT	133	86%	6%	3%	44%
7	DUBLIN	PCT	75	92%	19%	4%	59%
7	TUSCALOOSA	PCT	64	94%	14%	2%	61%
8	BAY PINES	SUPT	237	84%	13%	3%	61%
8	GAINESVILLE	PCT	49	82%	16%	6%	63%
8	MIAMI	PCT	52	81%	15%	8%	65%
8	SAN JUAN	PCT	44	95%	27%	0%	70%
8	TAMPA	PCT	92	86%	17%	2%	58%
9	LEXINGTON	PCT	45	98%	2%	2%	73%
9	LOUISVILLE	PCT	26	73%	8%	4%	46%
9	MEMPHIS	PCT	67	96%	6%	4%	51%
9	MOUNTAIN HOME	PCT	122	95%	7%	2%	53%
10	BRECKSVILLE	PCT	63	94%	13%	6%	62%
10	CHILLICOTHE	PCT	116	90%	0%	0%	48%
10	CINCINNATI	PCT	71	72%	4%	3%	48%
10	COLUMBUS	PCT	164	94%	11%	7%	81%
11	ANN ARBOR	PCT	26	85%	12%	8%	62%
11	BATTLE CREEK	PCT	47	91%	26%	6%	55%
11	DANVILLE	PCT	145	87%	3%	7%	50%
11	NORTHERN IN HCS: Marion	PCT	14	86%	14%	0%	29%

Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner Of War	Service Connected
12	CHICAGO HCS: West Side	PCT	130	93%	15%	2%	48%
12	HINES	PCT	41	85%	12%	0%	66%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	68%	7%	4%	54%
13	MINNEAPOLIS	PCT	110	79%	7%	3%	63%
13	SIOUX FALLS	PCT	23	96%	0%	0%	83%
14	CENTRAL IA HCS: Knoxville	PCT	26	96%	0%	4%	42%
14	IOWA CITY	PCT	80	83%	4%	4%	44%
14	NE-WESTERN IA HCS: Omaha	PCT	63	79%	13%	5%	75%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	95%	0%	0%	70%
15	EASTERN KS HCS: Topeka	PCT	59	86%	8%	0%	56%
15	KANSAS CITY	PCT	109	81%	12%	6%	61%
15	POPLAR BLUFF	PCT	49	98%	16%	4%	82%
15	ST. LOUIS	PCT	161	94%	28%	4%	53%
15	WICHITA	PCT	68	72%	6%	1%	41%
16	FAYETTEVILLE	PCT	78	85%	1%	5%	60%
16	GULF COAST HCS: Biloxi	PCT	140	97%	14%	1%	64%
16	HOUSTON	PCT	181	79%	12%	4%	53%
16	JACKSON	PCT	95	91%	9%	5%	72%
16	NEW ORLEANS	PCT	74	96%	12%	3%	49%
16	NEW ORLEANS	SUPT	51	88%	25%	2%	24%
16	OKLAHOMA CITY	PCT	81	95%	12%	1%	43%
17	CENTRAL TX VETERANS HCS: Temple	PCT	365	80%	0%	1%	65%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	79%	3%	0%	61%
17	NORTH TX HCS: Dallas	PCT	92	87%	0%	3%	57%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	88%	12%	2%	70%
18	EL PASO	PCT	135	81%	7%	3%	67%
18	NM HCS: Albuquerque	PCT	225	82%	8%	3%	48%
18	PHOENIX	PCT	129	80%	2%	3%	50%
18	SOUTHERN AZ HCS: Tucson	PCT	143	71%	13%	6%	62%
19	CHEYENNE	PCT	34	76%	18%	0%	71%
19	GRAND JUNCTION	PCT	198	88%	14%	3%	79%
19	SALT LAKE CITY	PCT	118	90%	13%	4%	40%
20	BOISE	PCT	91	71%	4%	2%	59%
20	PORTLAND	PCT	310	75%	15%	2%	69%
20	PUGET SOUND HCS: American Lake	PCT	205	83%	8%	3%	68%
20	PUGET SOUND HCS: Seattle	PCT	211	74%	4%	2%	62%
21	HI: Honolulu	PCT	37	84%	5%	8%	73%
21	NORTHERN CA HCS	PCT	100	93%	6%	1%	51%
21	PALO ALTO HCS: San Jose	PCT	48	92%	2%	8%	56%
21	SAN FRANCISCO	PCT	110	92%	8%	2%	55%
21	SAN FRANCISCO	SUPT	29	86%	10%	3%	38%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	95%	24%	2%	56%
22	GREATER LOS ANGELES HCS: West LA	PCT	197	77%	13%	2%	44%
22	LOMA LINDA	PCT	30	97%	20%	0%	80%
22	SAN DIEGO	PCT	237	85%	20%	4%	57%
TOTAL			9253				
MEAN			98	84%	9%	3%	57%
S.D.			67	10%	7%	2%	13%

Table 2-16. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Disorder
1	578	58%	50%	7%	8%
2	184	75%	47%	18%	13%
3	423	39%	30%	4%	5%
4	241	61%	28%	6%	5%
5	238	57%	44%	10%	11%
6	457	62%	34%	3%	4%
7	695	75%	35%	7%	2%
8	474	71%	39%	9%	12%
9	260	76%	61%	2%	5%
10	414	54%	48%	4%	6%
11	232	56%	51%	8%	6%
12	171	61%	19%	4%	22%
13	235	66%	53%	7%	14%
14	189	70%	57%	3%	15%
15	446	69%	44%	6%	8%
16	700	67%	62%	4%	9%
17	688	66%	31%	7%	3%
18	632	57%	42%	5%	6%
19	350	67%	72%	11%	29%
20	817	66%	38%	8%	11%
21	324	47%	27%	4%	8%
22	505	64%	60%	15%	5%
TOTAL	9253				
MEAN	421	63%	44%	7%	9%
S.D.	197	9%	13%	4%	6%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
1	BOSTON HCS: Boston	PCT	132	57%	61%	9%	13%
1	BOSTON HCS: Brockton	PCT	63	69%	29%	13%	0%
1	BOSTON HCS: Brockton	SUPT	27	37%	4%	0%	11%
1	CT HCS: West Haven	PCT	140	48%	38%	4%	6%
1	CT HCS: West Haven	SUPT	54	53%	39%	13%	7%
1	MANCHESTER	PCT	73	74%	86%	3%	8%
1	PROVIDENCE	PCT	70	69%	69%	9%	7%
1	WHITE RIVER JUNCTION	PCT	19	53%	22%	6%	5%
2	CANANDAIGUA	PCT	172	76%	45%	19%	13%
2	WESTERN NY HCS: Batavia	PCT	12	58%	67%	0%	8%
3	BRONX	PCT	63	29%	42%	3%	14%
3	NJ HCS: East Orange	PCT	80	44%	83%	67%	1%
3	NY HARBOR HCS: Brooklyn	PCT	199	37%	24%	3%	3%
3	NY HARBOR HCS: New York	PCT	81	51%	35%	6%	9%
4	COATESVILLE	PCT	41	80%	22%	15%	2%
4	PHILADELPHIA	PCT	50	54%	7%	5%	6%
4	PITTSBURGH HCS: Highland Drive	PCT	98	48%	32%	2%	4%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	77%	42%	6%	6%
5	MD HCS: Baltimore	PCT	110	48%	78%	11%	19%
5	MD HCS: Perry Point	PCT	24	75%	33%	17%	17%
5	WASHINGTON DC	PCT	104	63%	7%	6%	1%
6	ASHEVILLE	PCT	9	100%	89%	11%	22%
6	DURHAM	PCT	163	52%	60%	1%	3%
6	HAMPTON	PCT	129	67%	9%	1%	2%
6	SALISBURY	PCT	156	66%	26%	7%	4%
7	ATLANTA	PCT	61	67%	18%	10%	2%
7	AUGUSTA	PCT	95	88%	93%	1%	6%
7	BIRMINGHAM	PCT	108	72%	23%	3%	3%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	81%	14%	16%	3%
7	CHARLESTON	PCT	133	47%	68%	8%	2%
7	DUBLIN	PCT	75	100%	4%	4%	0%
7	TUSCALOOSA	PCT	64	83%	22%	3%	2%
8	BAY PINES	SUPT	237	73%	22%	10%	9%
8	GAINESVILLE	PCT	49	73%	63%	0%	10%
8	MIAMI	PCT	52	65%	38%	12%	8%
8	SAN JUAN	PCT	44	86%	23%	2%	5%
8	TAMPA	PCT	92	63%	77%	12%	24%
9	LEXINGTON	PCT	45	80%	7%	0%	0%
9	LOUISVILLE	PCT	26	88%	12%	0%	4%
9	MEMPHIS	PCT	67	77%	91%	3%	7%
9	MOUNTAIN HOME	PCT	122	71%	76%	2%	6%
10	BRECKSVILLE	PCT	63	51%	52%	3%	22%
10	CHILLICOTHE	PCT	116	26%	25%	5%	0%
10	CINCINNATI	PCT	71	37%	27%	3%	6%
10	COLUMBUS	PCT	164	82%	73%	3%	3%
11	ANN ARBOR	PCT	26	27%	63%	0%	19%
11	BATTLE CREEK	PCT	47	72%	17%	15%	4%
11	DANVILLE	PCT	145	56%	66%	7%	6%
11	NORTHERN IN HCS: Marion	PCT	14	57%	0%	7%	0%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
12	CHICAGO HCS: West Side	PCT	130	60%	15%	3%	4%
12	HINES	PCT	41	63%	29%	7%	80%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	61%	44%	9%	12%
13	MINNEAPOLIS	PCT	110	67%	60%	7%	17%
13	SIOUX FALLS	PCT	23	87%	61%	4%	9%
14	CENTRAL IA HCS: Knoxville	PCT	26	81%	12%	0%	12%
14	IOWA CITY	PCT	80	65%	55%	4%	15%
14	NE-WESTERN IA HCS: Omaha	PCT	63	70%	75%	3%	14%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	80%	70%	0%	20%
15	EASTERN KS HCS: Topeka	PCT	59	78%	60%	12%	12%
15	KANSAS CITY	PCT	109	69%	85%	15%	19%
15	POPLAR BLUFF	PCT	49	90%	12%	2%	2%
15	ST. LOUIS	PCT	161	66%	10%	1%	3%
15	WICHITA	PCT	68	50%	69%	1%	4%
16	FAYETTEVILLE	PCT	78	69%	21%	1%	3%
16	GULF COAST HCS: Biloxi	PCT	140	66%	91%	7%	1%
16	HOUSTON	PCT	181	69%	62%	2%	24%
16	JACKSON	PCT	95	82%	35%	7%	6%
16	NEW ORLEANS	PCT	74	59%	84%	3%	1%
16	NEW ORLEANS	SUPT	51	67%	82%	12%	12%
16	OKLAHOMA CITY	PCT	81	56%	51%	3%	7%
17	CENTRAL TX VETERANS HCS: Temple	PCT	365	67%	10%	10%	2%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	76%	10%	3%	0%
17	NORTH TX HCS: Dallas	PCT	92	66%	90%	4%	1%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	62%	47%	4%	8%
18	EL PASO	PCT	135	57%	46%	4%	5%
18	NM HCS: Albuquerque	PCT	225	47%	43%	5%	6%
18	PHOENIX	PCT	129	68%	62%	9%	7%
18	SOUTHERN AZ HCS: Tucson	PCT	143	64%	23%	5%	6%
19	CHEYENNE	PCT	34	76%	50%	9%	15%
19	GRAND JUNCTION	PCT	198	83%	91%	15%	43%
19	SALT LAKE CITY	PCT	118	34%	47%	6%	9%
20	BOISE	PCT	91	71%	50%	16%	16%
20	PORTLAND	PCT	310	71%	41%	10%	18%
20	PUGET SOUND HCS: American Lake	PCT	205	68%	32%	6%	6%
20	PUGET SOUND HCS: Seattle	PCT	211	56%	35%	5%	3%
21	HI: Honolulu	PCT	37	30%	44%	3%	8%
21	NORTHERN CA HCS	PCT	100	59%	11%	3%	12%
21	PALO ALTO HCS: San Jose	PCT	48	52%	30%	11%	0%
21	SAN FRANCISCO	PCT	110	37%	32%	0%	5%
21	SAN FRANCISCO	SUPT	29	57%	36%	14%	14%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	61%	68%	12%	17%
22	GREATER LOS ANGELES HCS: West LA	PCT	197	71%	49%	18%	3%
22	LOMA LINDA	PCT	30	70%	40%	3%	20%
22	SAN DIEGO	PCT	237	59%	71%	15%	3%
TOTAL			9253				
MEAN			98	64%	44%	7%	9%
S.D.			67	16%	26%	8%	10%

Table 2-18. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2000.

VISN	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
1	578	64%	10%	17%	10%
2	184	42%	3%	18%	35%
3	423	72%	4%	21%	3%
4	241	68%	7%	21%	5%
5	238	83%	3%	9%	5%
6	457	78%	10%	7%	4%
7	695	68%	5%	22%	4%
8	474	83%	4%	9%	3%
9	260	85%	6%	9%	1%
10	414	74%	2%	10%	14%
11	232	57%	2%	19%	21%
12	171	68%	8%	23%	1%
13	235	81%	0%	11%	7%
14	189	80%	5%	11%	4%
15	446	75%	4%	15%	5%
16	700	75%	6%	12%	6%
17	688	83%	5%	8%	3%
18	632	78%	4%	13%	3%
19	350	57%	1%	35%	5%
20	817	75%	6%	11%	7%
21	324	62%	8%	20%	10%
22	505	77%	11%	7%	3%
TOTAL	9253				
MEAN	421	72%	5%	15%	7%
S.D.	197	11%	3%	7%	8%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
1	BOSTON HCS: Boston	PCT	132	52%	20%	20%	8%
1	BOSTON HCS: Brockton	PCT	63	46%	19%	3%	32%
1	BOSTON HCS: Brockton	SUPT	27	48%	0%	0%	52%
1	CT HCS: West Haven	PCT	140	56%	8%	29%	6%
1	CT HCS: West Haven	SUPT	54	48%	7%	39%	6%
1	MANCHESTER	PCT	73	93%	1%	5%	0%
1	PROVIDENCE	PCT	70	100%	0%	0%	0%
1	WHITE RIVER JUNCTION	PCT	19	79%	0%	21%	0%
2	CANANDAIGUA	PCT	172	40%	3%	19%	38%
2	WESTERN NY HCS: Batavia	PCT	12	83%	0%	17%	0%
3	BRONX	PCT	63	95%	2%	2%	2%
3	NJ HCS: East Orange	PCT	80	59%	3%	38%	1%
3	NY HARBOR HCS: Brooklyn	PCT	199	68%	7%	21%	4%
3	NY HARBOR HCS: New York	PCT	81	75%	0%	21%	2%
4	COATESVILLE	PCT	41	98%	0%	0%	2%
4	PHILADELPHIA	PCT	50	64%	16%	18%	2%
4	PITTSBURGH HCS: Highland Drive	PCT	98	45%	7%	39%	9%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	92%	2%	6%	0%
5	MD HCS: Baltimore	PCT	110	74%	4%	17%	5%
5	MD HCS: Perry Point	PCT	24	71%	0%	8%	21%
5	WASHINGTON DC	PCT	104	96%	2%	0%	1%
6	ASHEVILLE	PCT	9	89%	11%	0%	0%
6	DURHAM	PCT	163	47%	26%	17%	9%
6	HAMPTON	PCT	129	95%	2%	4%	0%
6	SALISBURY	PCT	156	96%	0%	1%	1%
7	ATLANTA	PCT	61	97%	0%	2%	0%
7	AUGUSTA	PCT	95	39%	15%	42%	4%
7	BIRMINGHAM	PCT	108	64%	6%	27%	3%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	67%	2%	25%	6%
7	CHARLESTON	PCT	133	89%	3%	6%	2%
7	DUBLIN	PCT	75	83%	0%	17%	0%
7	TUSCALOOSA	PCT	64	38%	16%	36%	11%
8	BAY PINES	SUPT	237	91%	2%	5%	2%
8	GAINESVILLE	PCT	49	82%	4%	8%	6%
8	MIAMI	PCT	52	81%	17%	2%	0%
8	SAN JUAN	PCT	44	95%	2%	0%	2%
8	TAMPA	PCT	92	59%	5%	28%	8%
9	LEXINGTON	PCT	45	89%	0%	11%	0%
9	LOUISVILLE	PCT	26	100%	0%	0%	0%
9	MEMPHIS	PCT	67	84%	7%	7%	1%
9	MOUNTAIN HOME	PCT	122	80%	8%	11%	1%
10	BRECKSVILLE	PCT	63	68%	0%	29%	3%
10	CHILLICOTHE	PCT	116	76%	0%	1%	23%
10	CINCINNATI	PCT	71	41%	1%	21%	37%
10	COLUMBUS	PCT	164	89%	4%	5%	1%
11	ANN ARBOR	PCT	26	58%	4%	19%	12%
11	BATTLE CREEK	PCT	47	68%	0%	30%	2%
11	DANVILLE	PCT	145	54%	2%	13%	30%
11	NORTHERN IN HCS: Marion	PCT	14	50%	0%	43%	7%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2000.

VISN	STATION NAME	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
12	CHICAGO HCS: West Side	PCT	130	74%	2%	24%	0%
12	HINES	PCT	41	49%	24%	22%	5%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	73%	0%	13%	15%
13	MINNEAPOLIS	PCT	110	91%	1%	5%	1%
13	SIoux FALLS	PCT	23	70%	0%	26%	0%
14	CENTRAL IA HCS: Knoxville	PCT	26	88%	0%	8%	4%
14	IOWA CITY	PCT	80	73%	9%	18%	1%
14	NE-WESTERN IA HCS: Omaha	PCT	63	94%	2%	3%	2%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	60%	5%	10%	25%
15	EASTERN KS HCS: Topeka	PCT	59	90%	0%	7%	3%
15	KANSAS CITY	PCT	109	62%	1%	28%	7%
15	POPLAR BLUFF	PCT	49	84%	0%	10%	6%
15	ST. LOUIS	PCT	161	78%	9%	7%	3%
15	WICHITA	PCT	68	68%	0%	25%	7%
16	FAYETTEVILLE	PCT	78	88%	0%	10%	1%
16	GULF COAST HCS: Biloxi	PCT	140	50%	21%	7%	21%
16	HOUSTON	PCT	181	93%	3%	3%	1%
16	JACKSON	PCT	95	87%	0%	12%	1%
16	NEW ORLEANS	PCT	74	58%	5%	26%	8%
16	NEW ORLEANS	SUPT	51	78%	2%	16%	2%
16	OKLAHOMA CITY	PCT	81	60%	1%	32%	5%
17	CENTRAL TX VETERANS HCS: Temple	PCT	365	84%	7%	9%	0%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	95%	0%	0%	0%
17	NORTH TX HCS: Dallas	PCT	92	67%	0%	14%	18%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	87%	6%	4%	3%
18	EL PASO	PCT	135	55%	9%	27%	10%
18	NM HCS: Albuquerque	PCT	225	85%	5%	7%	2%
18	PHOENIX	PCT	129	71%	1%	16%	1%
18	SOUTHERN AZ HCS: Tucson	PCT	143	94%	1%	5%	1%
19	CHEYENNE	PCT	34	94%	0%	6%	0%
19	GRAND JUNCTION	PCT	198	61%	1%	35%	3%
19	SALT LAKE CITY	PCT	118	39%	3%	43%	9%
20	BOISE	PCT	91	85%	4%	2%	9%
20	PORTLAND	PCT	310	77%	10%	10%	2%
20	PUGET SOUND HCS: American Lake	PCT	205	87%	2%	6%	3%
20	PUGET SOUND HCS: Seattle	PCT	211	57%	4%	22%	16%
21	HI: Honolulu	PCT	37	81%	3%	11%	5%
21	NORTHERN CA HCS	PCT	100	61%	5%	18%	16%
21	PALO ALTO HCS: San Jose	PCT	48	50%	0%	42%	8%
21	SAN FRANCISCO	PCT	110	59%	14%	18%	8%
21	SAN FRANCISCO	SUPT	29	76%	14%	10%	0%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	39%	24%	29%	7%
22	GREATER LOS ANGELES HCS: West LA	PCT	197	87%	2%	7%	4%
22	LOMA LINDA	PCT	30	83%	7%	7%	3%
22	SAN DIEGO	PCT	237	75%	17%	3%	3%
TOTAL			9253				
MEAN			98	73%	5%	15%	7%
S.D.			67	18%	6%	12%	9%

Table 2-20. Medical Status, Incarceration, Sexual and Noncombat Trauma
Among Veterans in Specialized Outpatient PTSD Programs, by VISN, FY 2000.

VISN	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
1	578	70%	15%	5%	8%
2	184	74%	30%	5%	22%
3	423	67%	15%	3%	7%
4	241	69%	15%	9%	12%
5	238	70%	29%	3%	11%
6	457	70%	15%	2%	11%
7	695	78%	19%	2%	11%
8	474	78%	19%	4%	4%
9	260	74%	20%	3%	3%
10	414	76%	10%	2%	6%
11	232	68%	16%	1%	4%
12	171	79%	28%	2%	7%
13	235	73%	23%	12%	11%
14	189	67%	16%	7%	15%
15	446	76%	21%	2%	4%
16	700	75%	19%	3%	5%
17	688	77%	24%	6%	4%
18	632	71%	14%	6%	5%
19	350	74%	19%	2%	4%
20	817	71%	19%	9%	13%
21	324	59%	19%	2%	3%
22	505	69%	33%	6%	16%
TOTAL	9253				
MEAN	421	72%	20%	4%	8%
S.D.	197	5%	6%	3%	5%

Table 2-21. Medical Status and Incarceration Among Veterans in Specialized Outpatient PTSD Programs, FY 2000.

VISN	STATION NAME	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	Sexual Trauma P73	Noncombat Nonsexual Trauma
1	BOSTON HCS: Boston	PCT	132	72%	17%	7%	11%
1	BOSTON HCS: Brockton	PCT	63	67%	24%	8%	3%
1	BOSTON HCS: Brockton	SUPT	27	85%	11%	0%	4%
1	CONNECTICUT HCS: West Haven	PCT	140	73%	11%	3%	9%
1	CONNECTICUT HCS: West Haven	SUPT	54	65%	30%	4%	8%
1	MANCHESTER	PCT	73	53%	1%	3%	5%
1	PROVIDENCE	PCT	70	83%	14%	10%	6%
1	WHITE RIVER JUNCTION	PCT	19	68%	11%	5%	5%
2	CANANDAIGUA	PCT	172	75%	30%	5%	23%
2	WESTERN NEW YORK HCS: Batavia	PCT	12	58%	33%	0%	8%
3	BRONX	PCT	63	71%	14%	3%	8%
3	NEW JERSEY HCS: East Orange	PCT	80	44%	11%	3%	3%
3	NY HARBOR HCS: Brooklyn	PCT	199	79%	16%	2%	9%
3	NY HARBOR HCS: New York	PCT	81	58%	16%	5%	8%
4	COATESVILLE	PCT	41	73%	20%	44%	49%
4	PHILADELPHIA	PCT	50	54%	6%	0%	4%
4	PITTSBURGH HCS: Highland Drive	PCT	98	74%	7%	2%	4%
4	PITTSBURGH HCS: Highland Drive	SUPT	52	71%	33%	4%	6%
5	MD HCS: Baltimore	PCT	110	75%	19%	5%	19%
5	MD HCS: Perry Point	PCT	24	88%	46%	8%	17%
5	WASHINGTON DC	PCT	104	60%	35%	0%	1%
6	ASHEVILLE	PCT	9	100%	22%	11%	22%
6	DURHAM	PCT	163	69%	15%	1%	13%
6	HAMPTON	PCT	129	71%	12%	4%	13%
6	SALISBURY	PCT	156	67%	17%	1%	6%
7	ATLANTA	PCT	61	87%	30%	3%	5%
7	AUGUSTA	PCT	95	77%	19%	3%	30%
7	BIRMINGHAM	PCT	108	81%	18%	4%	8%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	159	69%	22%	3%	16%
7	CHARLESTON	PCT	133	79%	9%	0%	0%
7	DUBLIN	PCT	75	72%	21%	1%	8%
7	TUSCALOOSA	PCT	64	92%	20%	2%	6%
8	BAY PINES	SUPT	237	73%	20%	1%	3%
8	GAINESVILLE	PCT	49	85%	16%	8%	6%
8	MIAMI	PCT	52	85%	19%	8%	6%
8	SAN JUAN	PCT	44	75%	5%	0%	2%
8	TAMPA	PCT	92	86%	24%	8%	8%
9	LEXINGTON	PCT	45	76%	13%	4%	0%
9	LOUISVILLE	PCT	26	27%	15%	0%	0%
9	MEMPHIS	PCT	67	64%	30%	4%	3%
9	MOUNTAIN HOME	PCT	122	89%	19%	2%	4%
10	BRECKSVILLE	PCT	63	84%	29%	2%	6%
10	CHILLICOTHE	PCT	116	97%	1%	0%	10%
10	CINCINNATI	PCT	71	50%	6%	11%	6%
10	COLUMBUS	PCT	164	70%	10%	1%	2%
11	ANN ARBOR	PCT	26	68%	12%	4%	13%
11	BATTLE CREEK	PCT	47	74%	26%	2%	6%
11	DANVILLE	PCT	145	65%	13%	1%	2%
11	NORTHERN IN HCS: Marion	PCT	14	71%	14%	0%	7%

Table 2-21. Medical Status and Incarceration Among Veterans in Specialized Outpatient PTSD Programs, FY 2000.

VISN	STATION NAME	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	Sexual Trauma P73	Noncombat Nonsexual Trauma
12	CHICAGO HCS: West Side	PCT	130	78%	33%	3%	8%
12	HINES	PCT	41	83%	15%	0%	2%
13	BLACK HILLS HCS: Fort Meade	SUPT	102	74%	32%	16%	17%
13	MINNEAPOLIS	PCT	110	75%	14%	9%	7%
13	SIOUX FALLS	PCT	23	61%	22%	9%	4%
14	CENTRAL IA HCS: Knoxville	PCT	26	46%	31%	0%	0%
14	IOWA CITY	PCT	80	61%	10%	10%	16%
14	NE-WESTERN IA HCS: Lincoln	PCT	20	65%	20%	0%	5%
14	NE-WESTERN IA HCS: Omaha	PCT	63	84%	16%	8%	23%
15	EASTERN KS HCS: Topeka	PCT	59	80%	15%	2%	12%
15	KANSAS CITY	PCT	109	97%	24%	2%	8%
15	POPLAR BLUFF	PCT	49	80%	14%	0%	0%
15	ST. LOUIS	PCT	161	68%	22%	3%	2%
15	WICHITA	PCT	68	56%	24%	4%	1%
16	FAYETTEVILLE	PCT	78	72%	8%	6%	15%
16	GULF COAST HCS: Biloxi	PCT	140	91%	20%	2%	2%
16	HOUSTON	PCT	181	71%	23%	4%	5%
16	JACKSON	PCT	95	76%	8%	3%	3%
16	NEW ORLEANS	PCT	74	74%	9%	0%	0%
16	NEW ORLEANS	SUPT	51	67%	49%	6%	12%
16	OKLAHOMA CITY	PCT	81	63%	20%	0%	2%
17	CENTRAL TX VETERANS HCS: Temple	PCT	365	75%	31%	7%	2%
17	CENTRAL TX VETERANS HCS: Waco	PCT	38	75%	18%	3%	8%
17	NORTH TX HCS: Dallas	PCT	92	70%	18%	1%	3%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	193	85%	17%	8%	6%
18	EL PASO	PCT	135	71%	14%	10%	5%
18	NM HCS: Albuquerque	PCT	225	65%	12%	2%	3%
18	PHOENIX	PCT	129	82%	12%	2%	1%
18	SOUTHERN AZ HCS: Tucson	PCT	143	74%	17%	11%	11%
19	CHEYENNE	PCT	34	68%	15%	3%	0%
19	GRAND JUNCTION	PCT	198	80%	24%	2%	4%
19	SALT LAKE CITY	PCT	118	65%	11%	4%	6%
20	BOISE	PCT	91	74%	16%	5%	8%
20	PORTLAND	PCT	310	68%	22%	5%	8%
20	PUGET SOUND HCS: AMERICAN LAKE	PCT	205	75%	20%	8%	13%
20	PUGET SOUND HCS: SEATTLE	PCT	211	70%	17%	16%	22%
21	HAWAII: HONOLULU	PCT	37	57%	14%	3%	11%
21	NORTHERN CALIFORNIA HCS	PCT	100	62%	12%	3%	0%
21	PALO ALTO HCS: SAN JOSE	PCT	48	50%	21%	0%	4%
21	SAN FRANCISCO	PCT	110	61%	21%	1%	4%
21	SAN FRANCISCO	SUPT	29	59%	38%	4%	4%
22	GREATER LOS ANGELES HCS: East LA	PCT	41	83%	29%	0%	2%
22	GREATER LOS ANGELES HCS: West LA	PCT	197	71%	40%	9%	21%
22	LOMA LINDA	PCT	30	60%	23%	0%	7%
22	SAN DIEGO	PCT	237	66%	29%	6%	16%
TOTAL			9253				
MEAN			98	72%	19%	4%	8%
S.D.			67	12%	9%	5%	7%

PART III: PROGRAMMATIC CAPACITY

Part III presents tables for the workload, staffing and costs for FY 2000 of both the Specialized Outpatient PTSD Programs (SOPPs) and the Specialized Intensive PTSD Programs (SIPPs). In addition, the changes from FY 1996, FY 1997, and FY 1998 are presented for selected variables. Tracking of changes in administrative operation annually permits an examination of the shifting of programmatic capacity due to the reallocation of resources and/or the restructuring of clinical services. The data are presented at the VISN and individual program levels for the SOPPs, and at the VISN and facility levels for the SIPPs. Because programmatic changes continue to take place for a large number of SIPPs, it is difficult to present representative data for individual SIPPs over time. For this reason, we have shifted our approach to presenting aggregated data representing all intensive programs at a facility for workload, staffing, and costs.

Specialized PTSD Programs

Program types comprising the SOPPs are the PTSD Clinical Team (PCT), the Substance Use and PTSD Team (SUPT) and the Women's Stress Disorder Treatment Team (WSDTT). These program types are organized around the model of an ambulatory clinic. Veterans typically come in for services with an upper limit of approximately two times a week for one or two clinical contacts each time.

For SIPPs, program types include the Evaluation and Brief Treatment Unit (EBTPU), the PTSD and Substance Abuse Unit (PSU), the PTSD Residential Rehabilitation Program (PRRP), the Specialized Inpatient PTSD Unit (SIPU), and the Women's Trauma Recovery Program (WTRP). Also included, as an intensive program, is the PTSD Day Hospital (DH). PTSD Day Hospitals are outpatient in nature but involve coming in for services either on a daily basis or several times a week in which the clinical contacts are of four to eight hours duration. The DHsa is a dual-diagnosis PTSD Day Hospital with a substance abuse component.

Sources of Data

At the end of each fiscal year, the Northeast Program Evaluation Center (NEPEC) conducts a survey of all VA facilities with specialized PTSD programs asking for information concerning the workload, the FTEE and the expenditures for each program. This survey is called the *Specialized PTSD Programs Annual Report*. In FY 1997 the Annual Report was expanded to include a comprehensive assessment of all nursing staff as part of the total FTEE accounting for each intensive program. For this reason, FY 1997 is generally used as the base year for all differences computed for intensive programs. The only exception to this procedure is when FY 1997 data are not reported. For those situations, FY 1998 data are used, as noted in the affected tables. For outpatient programs, differences are calculated between FY 1996 and FY 2000.

For SOPPs, the number of veterans seen, the number of veterans treated and the number of outpatient visits are derived from the stop code data that are obtained from the

Austin Data Processing Center in Austin, Texas. Veterans *seen* include all veterans receiving services, while veterans *treated* include only those seen more than once. *New veterans treated* are those who were not treated in the previous fiscal year. For SIPPs, the number of veterans admitted and the number of bed days are obtained from the Annual Report.

Workload for SOPPs

Workload data for the SOPPs are presented by VISN in Table 3-1 and by individual program in Table 3-2. Differences from FY 1996 to FY 2000 are presented for number of visits, number of veterans seen, number of veterans treated and the percent of new veterans treated. Table 3-1 presents the unique number of veterans seen, the unique number of veterans treated, and the unique number of new veterans by VISN and nationally for FY 2000. As explained in Part I, these data were presented in previous years as the sum of the individual programs. This allowed for a duplicated count of veterans. In future years these data will continue to be presented as they are for FY 2000, in which unduplicated counts of veterans are determined for the VA as a total system as "ALL VA", and as totals for the columns in the tables as "SUM". The number of visits, the number of veterans seen, and the number of veterans treated represent *Gross Output*. *Productivity* is represented by two indices. One index is the number of visits per filled FTEE. This index is relevant to the standard of 1000 visits per FTEE that was the operative standard in VA prior to the adoption of the Special Emphasis Program (SEP) goals as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. The other index, the number of veterans treated per filled FTEE, is relevant to the SEP goal of 75 veterans treated per FTEE. VISNs and individual programs not meeting these targets are boxed in the tables. Nationally for FY 2000, the total number of visits for ALL VA was 539,976, the total number of veterans seen was 53,192, and the total number of veterans treated was 40,957. The percent of veterans treated who were new was 34% (see Table 3-1).

Workload for SIPPs

Workload data for the SIPPs can be found by VISN in Table 3-3 and by individual VA facility in Table 3-4. For each VA facility, the total number of admissions (episodes) to all programs and the total days of treatment represent *gross output*. *Efficiency* is represented by the length of program or the number of days of treatment per admission. It is calculated as the ratio of days of treatment to admissions for all intensive programs except PTSD Days Hospitals, for which length of program is the number of days from admission to discharge from the program. Total days of treatment for programs other than PTSD Day Hospitals, is equal to the bed days of care reported on the Annual Report. For PTSD Day Hospitals, days of treatment are represented by the number of stop code visits accrued for the fiscal year. Total days of treatment for PTSD Day Hospitals is generally less than the actual number of days spent in the program. This is due to the fact that PTSD Day Hospitals do not provide treatment seven days a week. Differences are presented for each variable. Across all VISNs for FY 2000, the total

number of admissions was 5,106 and the total number of days of treatment was 175,549 (see Table 3-3).

Staffing of the SOPPs

Staffing of the SOPPs, represented as filled FTEE, and the change in staffing levels between FY 1996 and FY 2000 are presented by VISN in Table 3-5 and by individual program in Table 3-6. Filled FTEE is calculated from the data supplied from the Annual Report. [See Appendix C.] A total of 465.38 FTEE were filled for FY 2000. Although there was substantial shifting within individual programs, staffing levels have remained fairly constant nationally with an increase of 43.96 FTEE.

Staffing of the SIPPs

Staffing of the SIPPs and the change in staffing levels are presented by VISN in Table 3-7 and by individual VA facility in Table 3-8. Overall, there were 362.07 FTEE filled for FY 2000. In FY 2000 there were a number of programmatic changes within the SIPPs. Several VA facilities reconfigured inpatient units to PRRPs and PTSD Day Hospitals. Adjustments in staffing levels accompanied these changes. Because of this movement within the system, SIPP FTEE experienced a substantial drop of 234.34 FTEE throughout all VA over that period of time.

Costs of the SOPPS

The direct costs for the SOPPs are presented in Table 3-9 by VISN and in Table 3-10 by individual program. Direct costs are calculated by using filled FTEE and expenditure data supplied from the Annual Report. [See Appendix C.] The *cost-efficiency* of the programs is represented by two indices: cost per visit and cost per capita. The former is calculated as the ratio of direct costs to number of visits, and the latter is calculated as the ratio of direct costs to number of veterans treated. In addition, differences between FY 2000 and FY 1996 are presented for cost per visit, cost per capita and direct costs. Nationwide in FY 2000, the SOPPs treated a total of 40,957 veterans with 539,976 visits at an overall direct cost of \$39,237,794. The average cost per visit was \$73, a decrease of \$8, and the average cost per capita was \$958, a decrease of \$226.

Costs of the SIPPS

The direct costs for the SIPPs are presented by VISN in Table 3-11 and by individual VA facility in Table 3-12. The *cost-efficiency* of the programs is represented by two indices: cost per diem and cost per capita. The former is calculated as the ratio of direct costs to number of days of treatment, and the latter is calculated as the ratio of direct costs to number of veterans admitted. The differences in costs are also calculated. Nationwide in FY 2000, the SIPPs admitted a total of 5,106 veterans with 175,549 days of treatment at an overall direct cost of \$23,804,532. The average cost per diem was \$136, a decrease of \$15, and the average cost per capita was \$4,662, a decrease of \$1,097.

Table 3-1. Workload for Specialized Outpatient PTSD Programs, by VISN.†

VISN	FY 2000			DIFF: FY 2000 - FY 1996			FY 2000			FY 2000		DIFF: FY 2000 - 1996
	# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/ VETS TREATED (%)	# NEW VETS TREATED/ VETS TREATED (%)
1	43153	3739	2936	7890	464	555	37.68	1145	78	1091	37%	-3%
2	14060	1047	846	6809	524	428	7.52	1871	113	404	48%	24%
3	36805	2576	2018	15608	1161	953	19.33	1904	104	573	28%	-12%
4	16769	1929	1412	-4211	-161	37	18.68	898	76	542	38%	4%
5	19341	1657	1110	6338	638	361	14.15	1367	78	557	50%	-8%
6	14632	2278	1723	-480	455	309	13.60	1076	127	434	25%	-16%
7	24128	2972	2060	7294	1352	883	24.00	1005	86	822	40%	-3%
8	23885	2737	2254	6168	1045	1065	24.49	975	92	522	23%	-16%
9	13778	1756	1415	853	89	170	12.61	1093	112	422	30%	-22%
10	21880	2296	1662	16398	1604	1102	28.19	776	59	768	46%	7%
11	15302	1664	1288	4410	158	238	15.57	983	83	377	29%	-2%
12	11145	826	681	-484	-55	2	9.90	1125	69	235	35%	-16%
13	14922	1291	1111	-3169	-314	-105	19.59	762	57	283	25%	-14%
14	9403	1193	898	-3638	156	157	12.32	763	73	228	25%	-7%
15	30316	2400	1930	11673	907	795	22.47	1349	86	518	27%	-9%
16	60096	6088	4840	21105	1960	1825	50.31	1195	96	1283	27%	-7%
17	27658	2641	2071	7391	972	754	21.05	1314	98	746	36%	-17%
18	32013	3034	2352	9652	776	724	20.03	1598	117	716	30%	-11%
19	12667	1481	1098	931	253	174	12.03	1053	91	524	48%	6%
20	44009	4307	3339	22083	2304	1862	35.46	1241	94	1458	44%	-1%
21	29039	2997	2106	9172	1403	864	24.05	1208	88	781	37%	-11%
22	24975	2573	1927	10118	1589	1215	22.36	1117	86	645	33%	-5%
SUM	539976	53482	41077	151911	17280	14368	465.38	1160	88	13929	34%	-7%
ALL VA	539976	53192	40957	151911	17369	14420	465.38	1160	88	13901	34%	-7%

† A boxed cell signifies a VISN whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans treated per filled FTEE.

Table 3-2. Workload for Specialized Outpatient PTSD Programs, by Individual Program. †

VISN	FACILITY	PROGRAM	FY 2000			DIFF: FY 2000 - FY 1996			FY 2000			FY 2000		DIFF: FY 2000 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/# VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
1	BOSTON HCS: Boston	PCT	4857	611	377	1104	240	71	3.84	1266	98	165	44%	-20%
1	BOSTON HCS: Boston	WSDTT	2442	172	133	-412	-115	-20	4.60	531	29	38	29%	-36%
1	BOSTON HCS: Brockton	PCT	4236	595	415	732	274	161	3.01	1407	138	141	34%	-24%
1	BOSTON HCS: Brockton	SUPT	1567	207	140	-2690	-485	-292	2.31	679	61	29	21%	-36%
1	CT HCS: West Haven*	PCT	9414	691	501	9414	691	501	5.44	1729	92	145	29%	NA
1	CT HCS: West Haven	SUPT	4856	296	259	1852	9	65	5.90	823	44	56	22%	-18%
1	MANCHESTER	PCT	3825	541	314	902	312	132	2.51	1526	125	109	35%	-20%
1	PROVIDENCE	PCT	10052	1147	724	3113	561	248	6.49	1548	111	175	24%	-14%
1	TOGUS **	PCT	0	0	0	-4110	-487	-364	0.00	NA	NA	0	NA	NA
1	WHITE RIVER JUNCTION	PCT	1904	400	268	-2015	-127	-125	3.58	532	75	125	47%	11%
2	CANANDAIGUA	PCT	7475	888	521	3545	630	303	5.11	1462	102	277	53%	25%
2	WESTERN NY HCS: Batavia	PCT	6585	906	540	3264	629	235	2.40	2742	225	198	37%	-20%
3	BRONX	PCT	11681	855	416	4865	580	205	5.92	1972	70	107	26%	-13%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	9568	1192	742	-1397	540	251	4.79	1998	155	169	23%	-13%
3	NEW YORK HARBOR HCS: New York	PCT	12021	1023	608	10070	701	365	5.81	2068	105	136	22%	-21%
3	NJ HCS: East Orange	PCT	3535	513	279	2070	370	166	2.81	1259	99	122	44%	-56%
4	CLARKSBURG**	PCT	0	0	0	-4235	-538	-366	0.00	NA	NA	0	NA	NA
4	COATESVILLE	PCT	4363	480	290	-708	1	-81	5.34	817	54	92	32%	-11%
4	PHILADELPHIA	PCT	2892	544	385	-2025	-239	-100	6.07	477	63	133	35%	-6%
4	PITTSBURGH HCS: Highland Drive	PCT	6166	847	530	1570	315	73	4.41	1398	120	149	28%	-8%
4	PITTSBURGH HCS: Highland Drive	SUPT	3348	328	223	1187	123	48	2.86	1172	78	57	26%	-9%
5	MD HCS: Baltimore	PCT	4761	920	467	832	511	190	4.08	1168	115	204	44%	-9%
5	MD HCS: Perry Point	PCT	3152	416	230	612	183	42	3.23	975	71	132	57%	-43%
5	WASHINGTON, DC	PCT	11428	1037	443	4894	678	151	6.84	1671	65	146	33%	-14%
6	ASHEVILLE	PCT	822	110	85	-446	-72	-24	1.28	643	66	8	9%	-83%
6	DURHAM	PCT	3915	987	692	138	378	200	4.77	822	145	198	29%	-25%
6	HAMPTON	PCT	6476	1280	656	246	681	149	4.62	1401	142	166	25%	-12%
6	SALISBURY	PCT	3419	475	299	-418	67	-3	2.93	1166	102	65	22%	-13%
7	ATLANTA	PCT	6184	634	329	2123	317	124	2.93	2109	112	116	35%	-28%
7	AUGUSTA*	PCT	NR	NR	NR	NC	NC	NC	3.54	NC	NC	NR	NC	NA
7	BIRMINGHAM	PCT	4681	812	488	1677	357	158	3.01	1556	162	142	29%	-20%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	3171	358	218	345	86	0	3.63	873	60	97	44%	-9%
7	CHARLESTON	PCT	2005	1655	325	-1106	1311	42	2.76	727	118	112	34%	-5%
7	DUBLIN*	PCT	868	216	139	868	216	139	5.52	157	25	134	96%	NA
7	TUSCALOOSA	PCT	7219	1199	578	3387	716	220	2.61	2762	221	173	30%	-34%
8	BAY PINES	SUPT	7985	1116	932	4749	765	714	9.49	841	98	184	20%	-41%
8	MIAMI	PCT	4366	493	298	1133	268	149	3.09	1413	96	78	26%	-5%
8	NO.FL/SO.GA VETERANS HS: Gainesville	PCT	3494	568	333	968	349	159	4.10	853	81	95	29%	-27%
8	SAN JUAN	PCT	2918	515	316	-821	-20	-61	4.00	730	79	40	13%	-16%
8	TAMPA	PCT	5122	695	375	139	372	123	3.82	1342	98	119	32%	-19%

Table 3-2. Workload for Specialized Outpatient PTSD Programs, by Individual Program. †

VISN	FACILITY	PROGRAM	FY 2000			DIFF: FY 2000 - FY 1996			FY 2000			FY 2000		DIFF: FY 2000 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED (# VETS TREATED (%))	# NEW VETS TREATED (# VETS TREATED (%))
9	LEXINGTON	PCT	3347	349	207	2297	135	47	3.41	982	61	96	46%	-54%
9	LOUISVILLE	PCT	1677	295	217	-34	11	8	1.93	869	112	68	31%	-51%
9	MEMPHIS	PCT	3376	589	321	-779	202	19	2.63	1283	122	136	42%	-4%
9	MIDDLE TN HCS: Murfreesboro**	PCT	0	0	0	-1741	-210	-172	0.00	NA	NA	0	NA	NA
9	MIDDLE TN HCS: Nashville	PCT	0***	0***	0***	NC	NC	NC	0.00***	NC	NC	0	NC	NC
9	MOUNTAIN HOME	PCT	5378	1001	674	1707	421	247	4.64	1160	145	123	18%	-30%
10	BRECKSVILLE*	PCT	11739	1059	532	11739	1059	532	11.84	992	45	210	39%	NA
10	BRECKSVILLE	WSDTT	1551	253	113	-208	48	-43	2.84	546	40	29	26%	-36%
10	CHILLICOTHE	PCT	3015	642	451	-708	151	24	3.91	771	115	91	20%	-18%
10	CINCINNATI*	PCT	4879	706	441	4879	706	441	7.65	638	58	194	44%	NA
10	COLUMBUS*	PCT	696	115	218	696	115	218	1.95	357	112	196	90%	NA
11	ANN ARBOR HCS	PCT	3580	296	183	1133	59	16	3.76	952	49	51	28%	-11%
11	BATTLE CREEK	PCT	6258	1032	540	2995	480	210	5.97	1049	91	173	32%	-9%
11	DANVILLE	PCT	2965	504	323	435	186	57	2.83	1047	114	109	34%	-11%
11	NORTHERN IN HCS: Marion	PCT	2499	391	282	-153	33	-6	3.01	829	94	52	18%	-9%
12	CHICAGO HCS: West Side	PCT	8002	752	409	858	105	134	5.82	1375	70	121	30%	-6%
12	HINES	PCT	3143	374	275	194	138	72	4.09	769	67	117	43%	-2%
12	IRON MOUNTAIN**	PCT	0	0	0	-1536	-291	-204	0.00	NA	NA	0	NA	NA
13	BLACK HILLS HCS: Fort Meade	SUPT	4251	360	322	136	85	114	4.81	883	67	99	31%	-7%
13	MINNEAPOLIS	PCT	9256	935	684	1828	308	204	12.83	721	53	153	22%	-18%
13	SIOUX FALLS	PCT	1415	200	134	555	74	43	1.95	727	69	29	22%	-18%
13	ST. CLOUD **	PCT	0	0	0	-5688	-545	-421	0.00	NA	NA	0	NA	NA
14	CENTRAL IA HCS: Knoxville*	PCT	1373	181	96	1373	181	96	0.92	1493	104	6	6%	NA
14	CENTRAL IA HCS: Knoxville**	SUPT	0	0	0	-4387	-290	-254	0.00	NA	NA	0	NA	NA
14	IOWA CITY	PCT	4054	685	477	226	43	48	5.26	770	91	104	22%	-10%
14	NE-WESTERN IA HCS: Lincoln	PCT	1134	196	186	-1110	27	46	2.32	489	80	35	19%	-24%
14	NE-WESTERN IA HCS: Omaha	PCT	2842	411	234	260	203	67	3.81	746	61	55	24%	-20%
15	EASTERN KS HCS: Topeka	PCT	9599	842	483	1716	391	73	6.40	1501	76	88	18%	-22%
15	KANSAS CITY	PCT	4489	565	364	1352	254	135	3.73	1205	98	106	29%	-22%
15	POPLAR BLUFF*	PCT	1659	301	223	1659	301	223	2.82	588	79	73	33%	NA
15	ST. LOUIS	PCT	9311	1160	619	6027	826	336	4.71	1977	131	143	23%	-28%
15	WICHITA	PCT	5258	533	276	919	202	31	4.82	1091	57	102	37%	3%
16	FAYETTEVILLE	PCT	5320	1123	757	2906	625	376	4.81	1105	157	201	27%	-11%
16	GULF COAST VETERANS HCS (Biloxi)	PCT	5318	1035	592	900	434	166	3.91	1361	151	124	21%	-11%
16	HOUSTON	PCT	15220	1982	1170	6115	1168	532	20.18	754	58	282	24%	-16%
16	JACKSON	PCT	6573	1057	752	2819	613	437	4.84	1357	155	148	20%	-25%
16	NEW ORLEANS	PCT	14469	2074	1148	7328	1065	490	5.78	2502	199	363	32%	-12%
16	NEW ORLEANS	SUPT	1943	259	207	-1882	-135	-88	3.66	531	57	51	25%	-13%
16	NEW ORLEANS	WSDTT	748	113	68	-809	-153	-85	2.46	304	28	19	28%	-18%
16	OKLAHOMA CITY	PCT	10505	795	498	3728	326	107	4.66	2254	107	150	30%	-18%

Table 3-2. Workload for Specialized Outpatient PTSD Programs, by Individual Program. †

VISN	FACILITY	PROGRAM	FY 2000			DIFF: FY 2000 - FY 1996			FY 2000			FY 2000		DIFF: FY 2000 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED (# VETS TREATED (%))	# NEW VETS TREATED (# VETS TREATED (%))
17	CENTRAL TX VETERANS HCS: Temple	PCT	5251	883	454	2450	725	322	5.95	883	76	248	55%	-42%
17	CENTRAL TX VETERANS HCS: Waco	PCT	5682	517	258	493	165	-55	5.06	1122	51	56	22%	-78%
17	NORTH TX HCS: Dallas	PCT	7730	909	594	1549	407	227	4.37	1768	136	195	33%	-15%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	8995	1125	797	2899	505	282	5.67	1585	140	259	32%	-1%
18	EL PASO VA HCS	PCT	7814	911	559	806	157	46	4.01	1948	139	179	32%	-15%
18	NEW MEXICO HCS (Albuquerque)	PCT	13419	1556	899	6605	1038	490	8.19	1638	110	247	27%	-28%
18	PHOENIX	PCT	6544	711	479	1952	285	149	5.01	1305	96	149	31%	-21%
18	SOUTHERN AZ HCS (Tucson)	PCT	4236	697	433	289	207	67	2.81	1507	154	149	34%	-9%
19	CHEYENNE	PCT	881	171	110	-1680	-167	-167	2.03	434	54	26	24%	-11%
19	DENVER **	PCT	0		0	-3389	-336	-243	0.00	NA	NA	0	NA	NA
19	GRAND JUNCTION	PCT	2562	457	305	1413	311	210	1.97	1299	155	97	32%	-68%
19	SALT LAKE CITY	PCT	9224	1086	686	4587	693	380	8.02	1150	86	268	39%	-7%
20	BOISE	PCT	5024	571	400	321	42	16	6.01	835	67	156	39%	-4%
20	PORTLAND	PCT	8033	1531	922	4563	1253	624	6.73	1193	137	550	60%	13%
20	PUGET SOUND HCS: Seattle	PCT	30952	4124	2295	17199	2687	1208	22.71	1363	101	849	37%	-18%
21	HONOLULU	PCT	5595	647	368	1763	265	89	3.84	1459	96	104	28%	-17%
21	NORTHERN CA HCS	PCT	2233	524	278	-288	111	-37	4.81	464	58	116	42%	-50%
21	PALO ALTO HCS: San Jose	PCT	5784	784	410	2392	495	174	3.29	1757	125	181	44%	-18%
21	SAN FRANCISCO	PCT	11855	1832	1048	5563	1082	437	8.60	1378	122	299	29%	-30%
21	SAN FRANCISCO	SUPT	3572	149	101	-258	-35	-35	3.51	1018	29	21	21%	-26%
22	GREATER LOS ANGELES HCS: East LA	PCT	4138	618	382	-1089	107	11	3.59	1152	106	47	12%	-23%
22	GREATER LOS ANGELES HCS: West LA*	PCT	6392	762	529	6392	762	529	9.77	654	54	217	41%	NA
22	LOMA LINDA	PCT	2909	306	150	-102	53	-43	1.22	2379	123	38	25%	-15%
22	LOMA LINDA	WSDTT	2244	232	179	178	83	66	2.78	806	64	53	30%	-14%
22	SAN DIEGO	PCT	9292	1120	709	4739	575	280	5.00	1860	142	243	34%	-19%
SUM			539976	71110	42689	151911	31881	13173	465.38	1160	92	13476	32%	-17%
ALL VA			539976	55504	42707	151911	16872	14303	465.38	1160	92	13901	33%	-8%

† A boxed cell signifies a program whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans per treated filled FTEE.

* Program was not open in FY 1996.

Table 3-3. Workload for Specialized Intensive PTSD Programs, by VISN.

VISN	FY 2000			DIFFERENCE: FY 2000 - FY 1997		
	# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM
1	429	13778	32	9	-1077	-3
2	242	3765	16	2	-183	-1
3	319	8622	27	-204	-10339	-9
4	275	12645	46	-101	-2980	4
5	173	16123	93	-53	6236	49
6	234	9743	42	-3	718	4
7	362	6114	17	-449	-13453	-7
8	126	7243	57	-11	-608	0
10	305	6875	23	88	-4414	-29
11	397	9017	23	103	418	-7
12	396	17144	43	-7	686	2
13	11	545	50	-37	92	40
14	45	1271	28	-88	-7801	-40
15	113	8792	78	2	-2158	-21
16	453	10018	22	81	-2573	-12
17	105	6187	59	-24	-928	4
19	213	4355	20	28	-4425	-27
20	612	14430	24	-90	-6034	-6
21	296	18882	64	-72	-148	12
22	0	0	NA	-82	-4703	NA
ALL VA	5106	175549	34	-908	-53674	-4

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

NA=Not Applicable.

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility.

VISN	FACILITY	FY 2000			DIFFERENCE: FY 2000 - FY 1997		
		# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM †	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM †
1	CT HCS: West Haven	28	3542	127	-18	108	52
1	NORTHAMPTON	126	4881	39	17	-2119	-25
1	TOGUS*	189	4626	15	-2	813	-1
1	WHITE RIVER JUNCTION*	86	729	17	12	121	-3
2	WESTERN NY HCS: Batavia	242	3765	16	2	-183	-1
3	BRONX**	0		NA	-146	-2972	NA
3	HUDSON VALLEY HCS: Montrose	142	4693	33	-38	-1974	-4
3	NJ HCS: Lyons	177	3929	22	-20	-5393	-25
4	CLARKSBURG	69	2761	40	-75	979	28
4	COATESVILLE	206	9884	48	-26	-3959	-12
5	MARTINSBURG	102	15150	149	-21	6296	77
5	MD HCS: Baltimore	71	973	14	-32	-60	4
6	SALEM	117	4038	35	0	-50	0
6	SALISBURY	117	5705	49	-3	768	8
7	AUGUSTA	169	NR	NC	-262	NC	NC
7	CENTRAL AL VETERANS HCS: Tuskegee**	0	0	NA	-210	-5534	NA
7	TUSCALOOSA*	193	6114	38	23	586	-1
8	BAY PINES	85	3718	44	9	182	-3
8	MIAMI	41	3525	86	-20	-790	15
10	BRECKSVILLE	56	NR	NC	8	NC	NC
10	CINCINNATI	196	2515	21	90	-1121	-14
10	DAYTON	53	4360	82	-10	67	14
11	BATTLE CREEK	397	9017	23	103	418	-7
12	MILWAUKEE	19	4980	262	1	-144	-23
12	NORTH CHICAGO	290	8654	30	15	631	1
12	TOMAH	87	3510	40	-23	199	10
13	MINNEAPOLIS* ‡	11	545	66	-37	92	-21
14	CENTRAL IA HCS: Des Moines	45	1271	28	-21	-1109	-8
14	CENTRAL IA HCS: Knoxville**	0	0	NA	-67	-6692	NA
15	EASTERN KS HCS: Topeka	113	8792	78	2	-2158	-21
16	CENTRAL AR VETERANS HCS (No. Little Rock)	256	7049	28	108	-714	-25
16	JACKSON	122	NR	16	-3	NC	-3
16	NEW ORLEANS	75	2969	40	-24	466	14
17	CENTRAL TX VETERANS HCS: Waco	105	6187	59	-24	-928	4

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility.

VISN	FACILITY	FY 2000			DIFFERENCE: FY 2000 - FY 1997		
		# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM †	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM †
19	DENVER	213	4355	37	102	-1256	-13
19	SHERIDAN**	0	0	NA	-74	-3169	NA
20	ALASKA HCS (Anchorage)**	0	0	NA	-38	-3650	NA
20	BOISE	24	913	38	0	25	1
20	PUGET SOUND HCS: American Lake	173	5990	35	-59	-2589	-2
20	PUGET SOUND HCS: Seattle	305	4363	14	18	332	0
20	ROSEBURG HCS	110	3164	29	-11	-152	1
21	HILO	52	4193	81	-38	268	37
21	PALO ALTO HCS	244	14689	60	-34	-416	6
22	GREATER LOS ANGELES HCS: West LA**	0	0	NA	-82	-4703	NA
ALL VA		5106	175549	34	-908	-53674	-4

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

NA=Not Applicable. NR=Not reported or not reported correctly. NC=Not calculated because data were not reported or unreliable.

† "Length of Program" for the PTSD Day Hospitals was calculated from admission & discharge dates rather than as a ratio of Days of Treatment to Number Admissions.

‡ The baseline data for this site were recalculated to be more accurate.

* For this facility FY 1998 data were used as baseline for computing differences because FY 1997 data were missing for one or more components.

** The Specialized Intensive PTSD program(s) at the facility was closed for all of FY 2000.

Table 3-5. FTEE for Specialized Outpatient Patient Program, by VISN.

VISN	FILLED FTEE FY 2000	DIFFERENCE: FILLED FTEE FY 2000 - FY 1996
1	37.68	1.12
2	7.52	-0.68
3	19.33	-1.34
4	18.68	-6.70
5	14.15	1.75
6	13.60	-1.43
7	24.00	4.21
8	24.49	2.94
9	12.61	-10.67
10	28.19	20.64
11	15.57	-0.90
12	9.90	-2.15
13	19.59	1.04
14	12.32	-3.35
15	22.47	6.77
16	50.31	15.00
17	21.05	1.31
18	20.03	-1.06
19	12.03	-1.09
20	35.46	12.80
21	24.05	-0.18
22	22.36	5.94
ALL VA	465.38	43.96

Table 3-6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program

VISN	FACILITY	PROGRAM	FILLED FTEE	DIFFERENCE:
			FY 2000	FILLED FTEE FY 2000 - FY 1996
1	BOSTON HCS: Boston	PCT	3.84	-0.08
1	BOSTON HCS: Boston	WSDTT	4.60	-1.05
1	BOSTON HCS: Brockton	PCT	3.01	-0.57
1	BOSTON HCS: Brockton	SUPT	2.31	-1.84
1	CT HCS: West Haven*	PCT	5.44	5.44
1	CT HCS: West Haven	SUPT	5.90	1.90
1	MANCHESTER	PCT	2.51	0.01
1	PROVIDENCE	PCT	6.49	0.74
1	TOGUS **	PCT	0.00	-3.10
1	WHITE RIVER JUNCTION	PCT	3.58	-0.33
2	CANANDAIGUA	PCT	5.11	0.91
2	WESTERN NY HCS: Batavia	PCT	2.40	-1.60
3	BRONX	PCT	5.92	2.32
3	NJ HCS: East Orange	PCT	2.81	-1.03
3	NY HARBOR HCS: Brooklyn	PCT	4.79	-2.44
3	NY HARBOR HCS: New York	PCT	5.81	-0.19
4	CLARKSBURG**	PCT	0.00	-3.72
4	COATESVILLE	PCT	5.34	0.33
4	PHILADELPHIA	PCT	6.07	0.92
4	PITTSBURGH HCS: Highland Drive	PCT	4.41	-2.09
4	PITTSBURGH HCS: Highland Drive	SUPT	2.86	-2.14
5	MD HCS: Baltimore	PCT	4.08	1.22
5	MD HCS: Perry Point	PCT	3.23	0.63
5	WASHINGTON, DC	PCT	6.84	-0.10
6	ASHEVILLE	PCT	1.28	-0.82
6	DURHAM	PCT	4.77	0.48
6	HAMPTON	PCT	4.62	0.34
6	SALISBURY	PCT	2.93	-1.43
7	ATLANTA	PCT	2.93	-0.97
7	AUGUSTA*	PCT	3.54	3.54
7	BIRMINGHAM	PCT	3.01	-0.89
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	3.63	-0.24
7	CHARLESTON	PCT	2.76	-1.36
7	DUBLIN*	PCT	5.52	5.52
7	TUSCALOOSA	PCT	2.61	-1.39
8	BAY PINES	SUPT	9.49	4.49
8	MIAMI	PCT	3.09	-0.91
8	NO.FL/SO.GA VETERANS HS: Gainesville	PCT	4.10	-0.61
8	SAN JUAN	PCT	4.00	0.00
8	TAMPA	PCT	3.82	-0.02
9	LEXINGTON	PCT	3.41	-0.40
9	LOUISVILLE	PCT	1.93	-3.07
9	MEMPHIS	PCT	2.63	-1.37
9	MIDDLE TN HCS: Murfreesboro**	PCT	0.00	-4.00
9	MIDDLE TN HCS: Nashville	PCT	0.00***	NC
9	MOUNTAIN HOME	PCT	4.64	0.64
10	BRECKSVILLE*	PCT	11.84	11.84
10	BRECKSVILLE	WSDTT	2.84	-0.91
10	CHILLICOTHE	PCT	3.91	0.11
10	CINCINNATI*	PCT	7.65	7.65
10	COLUMBUS*	PCT	1.95	1.95
11	ANN ARBOR HCS	PCT	3.76	-0.94
11	BATTLE CREEK	PCT	5.97	1.72
11	DANVILLE	PCT	2.83	-0.69
11	NORTHERN IN HCS: Marion	PCT	3.01	-0.99
12	CHICAGO HCS: West Side	PCT	5.82	0.12
12	HINES	PCT	4.09	-0.11
12	IRON MOUNTAIN	PCT	0.00	-2.15

Table 3-6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program

VISN	FACILITY	PROGRAM	FILLED FTEE	DIFFERENCE:
			FY 2000	FILLED FTEE FY 2000 - FY 1996
13	BLACK HILLS HCS: Fort Meade	SUPT	4.81	-0.19
13	MINNEAPOLIS	PCT	12.83	6.93
13	SIoux FALLS	PCT	1.95	-1.41
13	ST. CLOUD **	PCT	0.00	-4.29
14	CENTRAL IA HCS: Knoxville*	PCT	0.92	0.92
14	CENTRAL IA HCS: Knoxville**	SUPT	0.00	-4.50
14	IOWA CITY	PCT	5.26	1.01
14	NE-WESTERN IA HCS: Lincoln	PCT	2.32	-0.60
14	NE-WESTERN IA HCS: Omaha	PCT	3.81	-0.19
15	EASTERN KS HCS: Topeka	PCT	6.40	1.19
15	KANSAS CITY	PCT	3.73	-0.26
15	POPLAR BLUFF*	PCT	2.82	2.82
15	ST. LOUIS	PCT	4.71	0.71
15	WICHITA	PCT	4.82	2.32
16	FAYETTEVILLE	PCT	4.81	1.01
16	GULF COAST VETERANS HCS (Biloxi)	PCT	3.91	-0.09
16	HOUSTON	PCT	20.18	14.27
16	JACKSON	PCT	4.84	0.54
16	NEW ORLEANS	PCT	5.78	1.78
16	NEW ORLEANS	SUPT	3.66	-0.84
16	NEW ORLEANS	WSDTT	2.46	-1.84
16	OKLAHOMA CITY	PCT	4.66	0.16
17	CENTRAL TX VETERANS HCS: Temple	PCT	5.95	2.79
17	CENTRAL TX VETERANS HCS: Waco	PCT	5.06	0.58
17	NORTH TX HCS: Dallas	PCT	4.37	-1.93
17	SOUTH TX VETERANS HCS: San Antonio	PCT	5.67	-0.13
18	EL PASO VA HCS	PCT	4.01	0.01
18	NEW MEXICO HCS (Albuquerque)	PCT	8.19	1.34
18	PHOENIX	PCT	5.01	-1.36
18	SOUTHERN AZ HCS (Tucson)	PCT	2.81	-1.06
19	CHEYENNE	PCT	2.03	-1.49
19	DENVER **	PCT	0.00	-3.75
19	GRAND JUNCTION	PCT	1.97	0.25
19	SALT LAKE CITY	PCT	8.02	3.89
20	BOISE	PCT	6.01	0.01
20	PORTLAND	PCT	6.73	2.56
20	PUGET SOUND HCS: Seattle	PCT	22.71	10.22
21	HONOLULU	PCT	3.84	-1.28
21	NORTHERN CA HCS	PCT	4.81	1.48
21	PALO ALTO HCS	PCT	3.29	-0.11
21	SAN FRANCISCO	PCT	8.60	1.22
21	SAN FRANCISCO	SUPT	3.51	-1.49
22	GREATER LOS ANGELES HCS: East LA	PCT	3.59	-1.41
22	GREATER LOS ANGELES HCS: West LA*	PCT	9.77	9.77
22	LOMA LINDA	PCT	1.22	-2.78
22	LOMA LINDA	WSDTT	2.78	-0.81
22	SAN DIEGO	PCT	5.00	1.17
ALL VA			465.38	43.96

* Program was not open in FY 1996.

** Program was closed for all of FY 2000.

*** Due to administrative restructuring data were not reported for this program for the current fiscal year.

Table 3-7. FTEE for Specialized Intensive PTSD Programs, by VISN.

VISN	FILLED FTEE FY 2000	DIFFERENCE: FILLED FTEE FY 2000 - FY 1997
1	15.90	-3.82
2	8.61	-19.33
3	24.01	-21.49
4	27.17	-4.84
5	11.79	1.06
6	30.67	-4.26
7	22.89	-44.73
8	11.86	-14.75
10	21.53	-4.52
11	16.48	-6.90
12	28.49	-1.41
13	0.83	-3.56
14	2.02	-11.19
15	18.57	1.79
16	22.53	-28.18
17	19.93	3.48
19	7.58	-30.33
20	27.89	4.05
21	43.33	-16.82
22	0.00	-7.89
ALL VA	362.07	-234.34

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

Table 3-8. FTEE for Specialized Intensive PTSD Programs, by VA Facility.

VISN	FACILITY	FILLED FTEE FY 2000	DIFFERENCE: FILLED FTEE FY 2000 - FY 1997
1	CT HCS: West Haven	4.96	0.09
1	NORTHAMPTON	5.23	0.70
1	TOGUS*	3.53	-2.65
1	WHITE RIVER JUNCTION*	2.18	-1.97
2	WESTERN NY HCS: Batavia	8.61	-19.33
3	BRONX**	0.00	-11.90
3	HUDSON VALLEY HCS: Montrose	13.16	-1.87
3	NJ HCS: Lyons	10.85	-7.73
4	CLARKSBURG	8.21	-0.09
4	COATESVILLE	18.96	-4.74
5	MARTINSBURG	8.87	1.99
5	MD HCS: Baltimore	2.92	-0.93
6	SALEM	15.89	-0.61
6	SALISBURY	14.78	-3.65
7	AUGUSTA	11.84	-24.44
7	CENTRAL AL VETERANS HCS: Tuskegee**	0.00	-20.94
7	TUSCALOOSA*	11.05	0.66
8	BAY PINES	5.77	-4.10
8	MIAMI	6.09	-10.65
10	BRECKSVILLE	5.40	2.60
10	CINCINNATI	6.95	-7.55
10	DAYTON	9.18	0.43
11	BATTLE CREEK	16.48	-6.90
12	MILWAUKEE	2.91	-1.18
12	NORTH CHICAGO	16.67	0.64
12	TOMAH	8.92	-0.87
13	MINNEAPOLIS*	0.83	-3.56
14	CENTRAL IA HCS: Des Moines	2.02	-2.38
14	CENTRAL IA HCS: Knoxville**	0.00	-8.81
15	EASTERN KS HCS: Topeka	18.57	1.79
16	CENTRAL AR VETERANS HCS (No. Little Rock)	12.87	-18.53
16	JACKSON	4.23	-1.74
16	NEW ORLEANS	5.43	-7.92
17	CENTRAL TX VETERANS HCS: Waco	19.93	3.48
19	DENVER	7.58	-24.35
19	SHERIDAN**	0.00	-5.98
20	ALASKA HCS (Anchorage)**	0.00	-3.38
20	BOISE	2.53	-1.62
20	PUGET SOUND HCS: American Lake	8.92	0.77
20	PUGET SOUND HCS: Seattle	11.78	-3.57
20	ROSEBURG HCS	4.66	-8.84
21	HILO	16.57	1.51
21	PALO ALTO HCS	26.76	-18.32
22	GREATER LOS ANGELES HCS: West LA**	0.00	-7.89
ALL VA		362.07	-234.34

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

* For this facility FY 1998 data were used as baseline for computing differences because FY 1997 data were missing for one or more components.

** The Specialized Intensive PTSD program(s) at the facility was closed for all of FY 2000.

Table 3-9. Costs for Specialized Outpatient PTSD Programs, by VISN.

VISN	FY 2000					DIFF: FY 2000 -FY 1996		
	# VISITS	# VETERANS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
1	43153	2936	\$3,151,990	\$73	\$1,074	\$411,166	-\$5	-\$78
2	14060	846	\$667,345	\$47	\$789	\$104,143	-\$30	-\$559
3	36805	2018	\$1,834,833	\$50	\$909	\$199,902	-\$27	-\$626
4	16769	1412	\$1,859,226	\$111	\$1,317	-\$11,540	\$22	-\$44
5	19341	1110	\$1,223,381	\$63	\$1,102	\$504,618	\$8	\$143
6	14632	1723	\$1,220,582	\$83	\$708	\$182,714	\$15	-\$26
7	24128	2060	\$2,052,578	\$85	\$996	\$595,606	-\$1	-\$241
8	23885	2254	\$2,017,896	\$84	\$895	\$468,525	-\$3	-\$408
9	13778	1415	\$987,671	\$72	\$698	-\$701,873	-\$59	-\$659
10	21880	1662	\$2,286,703	\$105	\$1,376	\$1,763,698	\$9	\$442
11	15302	1288	\$1,188,266	\$78	\$923	\$102,415	-\$22	-\$112
12	11145	681	\$898,823	\$81	\$1,320	\$16,713	\$5	\$21
13	14922	1111	\$1,517,789	\$102	\$1,366	\$179,493	\$28	\$266
14	9403	898	\$1,109,577	\$118	\$1,236	-\$221,274	\$16	-\$560
15	30316	1930	\$1,901,564	\$63	\$985	\$668,492	-\$3	-\$101
16	60096	4840	\$4,562,347	\$76	\$943	\$1,869,752	\$7	\$50
17	27658	2071	\$1,593,000	\$58	\$769	\$88,249	-\$17	-\$373
18	32013	2352	\$1,660,733	\$52	\$706	\$117,677	-\$17	-\$242
19	12667	1098	\$939,267	\$74	\$855	-\$87,583	-\$13	-\$256
20	44009	3339	\$2,748,657	\$62	\$823	\$1,111,901	-\$12	-\$285
21	29039	2106	\$1,975,577	\$68	\$938	-\$51,272	-\$34	-\$694
22	24975	1927	\$1,839,991	\$74	\$955	\$515,884	-\$15	-\$905
SUM	539976	41077	\$39,237,794	\$73	\$955	\$7,827,404	-\$8	-\$221
ALL VA	539976	40957	\$39,237,794	\$73	\$958	\$7,827,404	-\$8	-\$226

† Direct Costs are All Other Dollars plus total Personal Dollars.

Table 3-10. Costs for Specialized Outpatient PTSD Programs, by Individual Program.

VISN	FACILITY	PROGRAM	FY 2000					DIFF: FY 2000 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
1	BOSTON HCS: Boston	PCT	4857	377	\$340,327	\$70	\$903	-\$81,891	-\$42	-\$477
1	BOSTON HCS: Boston	WSDTT	2442	133	\$342,052	\$140	\$2,572	\$58,815	\$41	\$721
1	BOSTON HCS: Brockton	PCT	4236	415	\$243,942	\$58	\$588	-\$29	-\$12	-\$373
1	BOSTON HCS: Brockton	SUPT	1567	140	\$169,617	\$108	\$1,212	-\$159,897	\$31	\$449
1	CT HCS: West Haven*	PCT	9414	501	\$495,616	\$53	\$989	\$495,616	NA	NA
1	CT HCS: West Haven	SUPT	4856	259	\$531,373	\$109	\$2,052	\$180,960	-\$7	\$245
1	MANCHESTER	PCT	3825	314	\$197,952	\$52	\$630	\$22,667	-\$8	-\$333
1	PROVIDENCE	PCT	10052	724	\$580,801	\$58	\$802	\$159,842	-\$3	-\$82
1	TOGUS **	PCT	0	0	\$0	NA	NA	-\$212,964	NA	NA
1	WHITE RIVER JUNCTION	PCT	1904	268	\$250,308	\$131	\$934	-\$51,955	\$54	\$165
2	CANANDAIGUA	PCT	7475	521	\$455,540	\$61	\$874	\$190,707	-\$6	-\$340
2	WESTERN NY HCS: Batavia	PCT	6585	540	\$211,805	\$32	\$392	-\$86,564	-\$58	-\$586
3	BRONX	PCT	11681	416	\$689,246	\$59	\$1,657	\$383,954	\$14	\$210
3	NEW YORK HARBOR HCS: Brooklyn	PCT	9568	742	\$373,281	\$39	\$503	-\$142,395	-\$8	-\$547
3	NEW YORK HARBOR HCS: New York	PCT	12021	608	\$560,771	\$47	\$922	\$70,555	-\$205	-\$1,095
3	NJ HCS: East Orange	PCT	3535	279	\$211,534	\$60	\$758	-\$112,213	-\$161	-\$2,107
4	CLARKSBURG**	PCT	0	0	\$0	NA	NA	-\$250,539	NA	NA
4	COATESVILLE	PCT	4363	290	\$492,656	\$113	\$1,699	\$93,541	\$34	\$623
4	PHILADELPHIA	PCT	2892	385	\$713,612	\$247	\$1,854	\$311,562	\$165	\$1,025
4	PITTSBURGH HCS: Highland Drive	PCT	6166	530	\$441,463	\$72	\$833	-\$11,717	-\$27	-\$159
4	PITTSBURGH HCS: Highland Drive	SUPT	3348	223	\$211,494	\$63	\$948	-\$154,388	-\$106	-\$1,142
5	MD HCS: Baltimore	PCT	4761	467	\$403,777	\$85	\$865	\$186,568	\$30	\$80
5	MD HCS: Perry Point	PCT	3152	230	\$288,444	\$92	\$1,254	\$111,403	\$22	\$312
5	WASHINGTON, DC	PCT	11428	443	\$531,161	\$46	\$1,199	\$206,648	-\$3	\$88
6	ASHEVILLE	PCT	822	85	\$111,126	\$135	\$1,307	-\$19,651	\$32	\$108
6	DURHAM	PCT	3915	692	\$378,182	\$97	\$547	\$94,239	\$21	-\$31
6	HAMPTON	PCT	6476	656	\$407,510	\$63	\$621	\$150,111	\$22	\$114
6	SALISBURY	PCT	3419	299	\$323,763	\$95	\$1,083	-\$41,986	-\$1	-\$128

Table 3-10. Costs for Specialized Outpatient PTSD Programs, by Individual Program.

VISN	FACILITY	PROGRAM	FY 2000					DIFF: FY 2000 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
7	ATLANTA	PCT	6184	329	\$269,185	\$44	\$818	-\$20,690	-\$28	-\$596
7	AUGUSTA*	PCT	NR	NR	\$298,921	NC	NC	\$298,921	NA	NA
7	BIRMINGHAM	PCT	4681	488	\$334,525	\$71	\$686	\$43,807	-\$25	-\$195
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	3171	218	\$224,769	\$71	\$1,031	\$10,615	-\$5	\$49
7	CHARLESTON	PCT	2005	325	\$321,740	\$160	\$990	-\$13,934	\$53	-\$196
7	DUBLIN*	PCT	868	139	\$337,038	\$388	\$2,425	\$337,038	NA	NA
7	TUSCALOOSA	PCT	7219	578	\$266,402	\$37	\$461	-\$60,150	-\$48	-\$451
8	BAY PINES	SUPT	7985	932	\$797,304	\$100	\$855	\$439,611	-\$11	-\$785
8	MIAMI	PCT	4366	298	\$237,638	\$54	\$797	-\$93,577	-\$48	-\$1,425
8	NO.FL/SO.GA VETERANS HS: Gainesville	PCT	3494	333	\$311,251	\$89	\$935	\$4,441	-\$32	-\$829
8	SAN JUAN	PCT	2918	316	\$355,456	\$122	\$1,125	\$70,549	\$46	\$369
8	TAMPA	PCT	5122	375	\$316,247	\$62	\$843	\$47,501	\$8	-\$223
9	LEXINGTON	PCT	3347	207	\$267,137	\$80	\$1,291	-\$2,420	-\$177	-\$394
9	LOUISVILLE	PCT	1677	217	\$113,391	\$68	\$523	-\$180,000	-\$104	-\$881
9	MEMPHIS	PCT	3376	321	\$155,206	\$46	\$484	-\$158,708	-\$30	-\$556
9	MIDDLE TN HCS: Murfreesboro**	PCT	0	0	\$0	NA	NA	-\$279,384	NA	NA
9	MIDDLE TN HCS: Nashville	PCT	0***	0***	0***	NC	NC	NC	NC	NC
9	MOUNTAIN HOME	PCT	5378	674	\$451,937	\$84	\$671	\$131,502	-\$3	-\$80
10	BRECKSVILLE*	PCT	11739	532	\$906,058	\$77	\$1,703	\$906,058	NA	NA
10	BRECKSVILLE	WSDTT	1551	113	\$231,010	\$149	\$2,044	\$9,021	\$23	\$621
10	CHILLICOTHE	PCT	3015	451	\$374,550	\$124	\$830	\$73,534	\$43	\$126
10	CINCINNATI*	PCT	4879	441	\$572,262	\$117	\$1,298	\$572,262	NA	NA
10	COLUMBUS*	PCT	696	218	\$202,823	\$291	\$930	\$202,823	NA	NA
11	ANN ARBOR HCS	PCT	3580	183	\$333,391	\$93	\$1,822	\$22,284	-\$34	-\$41
11	BATTLE CREEK	PCT	6258	540	\$446,410	\$71	\$827	\$119,049	-\$29	-\$165
11	DANVILLE	PCT	2965	323	\$177,736	\$60	\$550	-\$7,209	-\$13	-\$145
11	NORTHERN IN HCS: Marion	PCT	2499	282	\$230,729	\$92	\$818	-\$31,709	-\$7	-\$93
12	CHICAGO HCS: West Side	PCT	8002	409	\$520,225	\$65	\$1,272	\$101,644	\$6	-\$250
12	HINES	PCT	3143	275	\$378,598	\$120	\$1,377	\$46,402	\$8	-\$260
12	IRON MOUNTAIN**	PCT	0	0	\$0	NA	NA	-\$131,333	NA	NA
13	BLACK HILLS HCS: Fort Meade	SUPT	4251	322	\$353,668	\$83	\$1,098	\$25,406	\$3	-\$480
13	MINNEAPOLIS	PCT	9256	684	\$1,012,167	\$109	\$1,480	\$494,564	\$40	\$401
13	SIOUX FALLS	PCT	1415	134	\$151,955	\$107	\$1,134	-\$34,909	-\$110	-\$919
13	ST. CLOUD **	PCT	0	0	\$0	NA	NA	-\$305,567	NA	NA

Table 3-10. Costs for Specialized Outpatient PTSD Programs, by Individual Program.

VISN	FACILITY	PROGRAM	FY 2000					DIFF: FY 2000 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
14	CENTRAL IA HCS: Knoxville*	PCT	1373	96	\$90,439	\$66	\$942	\$90,439	NA	NA
14	CENTRAL IA HCS: Knoxville**	SUPT	0	0	\$0	NA	NA	-\$411,045	NA	NA
14	IOWA CITY	PCT	4054	477	\$483,736	\$119	\$1,014	\$147,797	\$32	\$231
14	NE-WESTERN IA HCS: Lincoln	PCT	1134	186	\$228,226	\$201	\$1,227	-\$77,424	\$65	-\$956
14	NE-WESTERN IA HCS: Omaha	PCT	2842	234	\$307,176	\$108	\$1,313	\$28,959	\$0	-\$353
15	EASTERN KS HCS: Topeka	PCT	9599	483	\$579,396	\$60	\$1,200	\$161,568	\$7	\$180
15	KANSAS CITY	PCT	4489	364	\$351,362	\$78	\$965	\$24,343	-\$26	-\$463
15	POPLAR BLUFF*	PCT	1659	223	\$235,119	\$142	\$1,054	\$235,119	NA	NA
15	ST. LOUIS	PCT	9311	619	\$436,168	\$47	\$705	\$131,152	-\$46	-\$373
15	WICHITA	PCT	5258	276	\$299,519	\$57	\$1,085	\$116,310	\$15	\$337
16	FAYETTEVILLE	PCT	5320	757	\$427,593	\$80	\$565	\$121,917	-\$46	-\$237
16	GULF COAST VETERANS HCS (Biloxi)	PCT	5318	592	\$372,870	\$70	\$630	\$100,870	\$9	-\$9
16	HOUSTON	PCT	15220	1170	\$1,916,454	\$126	\$1,638	\$1,451,178	\$75	\$909
16	JACKSON	PCT	6573	752	\$414,825	\$63	\$552	\$57,457	-\$32	-\$583
16	NEW ORLEANS	PCT	14469	1148	\$518,690	\$36	\$452	\$198,573	-\$9	-\$35
16	NEW ORLEANS	SUPT	1943	207	\$261,761	\$135	\$1,265	-\$16,731	\$62	\$321
16	NEW ORLEANS	WSDTT	748	68	\$217,600	\$291	\$3,200	-\$138,883	\$62	\$870
16	OKLAHOMA CITY	PCT	10505	498	\$432,553	\$41	\$869	\$95,370	-\$9	\$6
17	CENTRAL TX VETERANS HCS: Temple	PCT	5251	454	\$389,058	\$74	\$857	\$36,037	-\$52	-\$1,817
17	CENTRAL TX VETERANS HCS: Waco	PCT	5682	258	\$288,579	\$51	\$1,119	\$23,354	\$0	\$271
17	NORTH TX HCS: Dallas	PCT	7730	594	\$430,572	\$56	\$725	-\$57,949	-\$23	-\$606
17	SOUTH TX VETERANS HCS: San Antonio	PCT	8995	797	\$484,791	\$54	\$608	\$86,807	-\$11	-\$165
18	EL PASO VA HCS	PCT	7814	559	\$331,245	\$42	\$593	\$34,390	\$0	\$14
18	NEW MEXICO HCS (Albuquerque)	PCT	13419	899	\$649,511	\$48	\$722	\$163,271	-\$23	-\$466
18	PHOENIX	PCT	6544	479	\$430,384	\$66	\$899	-\$13,529	-\$31	-\$447
18	SOUTHERN AZ HCS (Tucson)	PCT	4236	433	\$249,593	\$59	\$576	-\$66,455	-\$21	-\$287
19	CHEYENNE	PCT	881	110	\$142,659	\$162	\$1,297	-\$111,488	\$63	\$379
19	DENVER **	PCT	0	0	\$0	NA	NA	-\$284,084	NA	NA
19	GRAND JUNCTION	PCT	2562	305	\$149,710	\$58	\$491	-\$24,114	-\$93	-\$1,339
19	SALT LAKE CITY	PCT	9224	686	\$646,898	\$70	\$943	\$332,103	\$2	-\$86
20	BOISE	PCT	5024	400	\$505,846	\$101	\$1,265	\$57,496	\$5	\$97
20	PORTLAND	PCT	8033	922	\$598,669	\$75	\$649	\$259,465	-\$23	-\$489
20	PUGET SOUND HCS: Seattle	PCT	30952	2295	\$1,644,142	\$53	\$716	\$794,940	-\$9	-\$65

Table 3-10. Costs for Specialized Outpatient PTSD Programs, by Individual Program.

VISN	FACILITY	PROGRAM	FY 2000					DIFF: FY 2000 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST†	COST PER VISIT	COST PER CAPITA	DIRECT COST†	COST PER VISIT	COST PER CAPITA
21	HONOLULU	PCT	5595	368	\$324,969	\$58	\$883	-\$19,547	-\$32	-\$352
21	NORTHERN CA HCS	PCT	2233	278	\$402,845	\$180	\$1,449	\$191,797	\$97	\$779
21	PALO ALTO HCS: San Jose	PCT	5784	410	\$189,671	\$33	\$463	-\$107,293	-\$55	-\$796
21	SAN FRANCISCO	PCT	11855	1048	\$861,670	\$73	\$822	\$62,465	-\$54	-\$486
21	SAN FRANCISCO	SUPT	3572	101	\$196,422	\$55	\$1,945	-\$178,695	-\$43	-\$813
22	GREATER LOS ANGELES HCS: East LA	PCT	4138	382	\$323,040	\$78	\$846	-\$77,627	\$1	-\$234
22	GREATER LOS ANGELES HCS: West LA*	PCT	6392	529	\$729,899	\$114	\$1,380	\$729,899	NA	NA
22	LOMA LINDA	PCT	2909	150	\$93,377	\$32	\$623	-\$235,787	-\$77	-\$1,083
22	LOMA LINDA	WSDTT	2244	179	\$240,018	\$107	\$1,341	-\$17,583	-\$18	-\$939
22	SAN DIEGO	PCT	9292	709	\$453,656	\$49	\$640	\$116,981	-\$25	-\$145
SUM			539976	42689	\$39,237,794	\$73	\$919	\$7,827,404	-\$8	-\$145
ALL VA			539976	42707	\$39,237,794	\$73	\$919	\$7,827,404	-\$8	-\$187

† Direct Costs are All Other Dollars plus total Personal Dollars.

* Program was not open in FY 1996.

** Program was closed for all of FY 2000.

*** Due to administrative restructuring, data were not reported for this program for the current fiscal year.

Table 3-11. Costs for Specialized Intensive PTSD Programs, by VISN.

VISN						DIFF: FY 2000 - FY 1997		
	# DAYS OF TREATMENT	# OF ADMISSIONS	DIRECT COST†	COST PER DIEM	COST PER CAPITA	DIRECT COST†	COST PER DIEM	COST PER CAPITA
1	13778	429	\$1,099,773	\$80	\$2,564	-\$170,577	-\$6	-\$461
2	3765	242	\$408,224	\$108	\$1,687	-\$855,528	-\$212	-\$3,579
3	8622	319	\$1,626,763	\$189	\$5,100	-\$1,270,049	\$36	-\$439
4	12645	275	\$1,770,260	\$140	\$6,437	-\$44,822	\$24	\$1,610
5	16123	173	\$907,061	\$56	\$5,243	\$211,204	-\$14	\$2,164
6	9743	234	\$1,857,650	\$191	\$7,939	-\$97,152	-\$26	-\$309
7	6114	362	\$1,875,359	\$307	\$5,181	-\$2,014,947	\$108	\$384
8	7243	126	\$884,648	\$122	\$7,021	-\$647,234	-\$73	-\$4,161
10	6875	305	\$1,332,652	\$205	\$4,369	-\$141,676	\$74	-\$2,425
11	9017	397	\$997,944	\$111	\$2,514	-\$315,713	-\$42	-\$1,955
12	17144	396	\$1,738,210	\$101	\$4,389	\$84,233	\$1	\$285
13	545	11	\$73,628	\$135	\$6,693	-\$237,851	-\$552	\$204
14	1271	45	\$127,232	\$100	\$2,827	-\$596,673	\$20	-\$2,616
15	8792	113	\$1,170,077	\$133	\$10,355	\$248,597	\$49	\$2,053
16	10018	453	\$1,365,089	\$136	\$3,013	-\$1,809,194	-\$116	-\$5,520
17	6187	105	\$1,173,073	\$190	\$11,172	\$347,637	\$74	\$4,773
19	4355	213	\$525,253	\$121	\$2,466	-\$1,464,663	-\$106	-\$8,290
20	14430	612	\$1,882,573	\$130	\$3,076	-\$925,987	-\$7	-\$925
21	18882	296	\$2,989,063	\$158	\$10,098	-\$473,402	-\$24	\$689
22	0	0	\$0	NA	NA	-\$656,952	NA	NA
ALL VA	175549	5106	\$23,804,532	\$136	\$4,662	-\$10,830,747	-\$15	-\$1,097

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

NA=Not Applicable.

† Direct Costs are All Other Dollars plus total Personal Dollars.

Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility.

	FACILITY	FY 2000					DIFFERENCE: FY 2000 - FY 1997		
		#Of DAYS OF TREATMENT	# Of ADMISSIONS	DIRECT COST	COST PER DIEM	COST PER CAPITA	DIRECT COST	COST PER DEIM	COST PER CAPITA
1	CT HCS: West Haven	3542	28	\$349,973	\$99	\$12,499	\$84,952	\$22	\$6,738
1	NORTHAMPTON	4881	126	\$341,163	\$70	\$2,708	\$87,117	\$34	\$377
1	TOGUS*	4626	189	\$261,521	\$57	\$1,384	-\$165,708	-\$56	-\$853
1	WHITE RIVER JUNCTION*	729	86	\$147,117	\$202	\$1,711	-\$176,938	-\$331	-\$2,668
2	WESTERN NY HCS: Batavia	3765	242	\$408,224	\$108	\$1,687	-\$855,528	-\$212	-\$3,579
3	BRONX**	0	0	\$0	NA	NA	-\$752,094	NA	NA
3	HUDSON VALLEY HCS: Montrose	4693	142	\$872,524	\$186	\$6,145	-\$45,336	\$48	\$1,045
3	NJ HCS: Lyons	3929	177	\$754,239	\$192	\$4,261	-\$472,619	\$60	-\$1,966
4	CLARKSBURG	2761	69	\$504,746	\$183	\$7,315	\$17,988	-\$90	\$3,935
4	COATESVILLE	9884	206	\$1,265,514	\$128	\$6,143	-\$62,809	\$32	\$418
5	MARTINSBURG	15150	102	\$595,447	\$39	\$5,838	\$189,958	-\$6	\$2,541
5	MD HCS: Baltimore	973	71	\$311,614	\$320	\$4,389	\$21,246	\$39	\$1,570
6	SALEM	4038	117	\$934,629	\$231	\$7,988	\$51,484	\$15	\$440
6	SALISBURY	5705	117	\$923,021	\$162	\$7,889	-\$148,636	-\$55	-\$1,041
7	AUGUSTA	NR	169	\$954,799	NC	\$5,650	-\$1,269,815	NC	\$488
7	CENTRAL AL VETERANS HCS: Tuskegee**	0	0	\$0	NA	NA	-\$993,109	NA	NA
7	TUSCALOOSA*	6114	193	\$920,560	\$151	\$4,770	\$247,978	\$29	\$813
8	BAY PINES	3718	85	\$435,394	\$117	\$5,122	-\$144,277	-\$47	-\$2,505
8	MIAMI	3525	41	\$449,254	\$127	\$10,957	-\$502,957	-\$93	-\$4,653
10	BRECKSVILLE	NR	56	\$349,346	NC	\$6,238	\$134,021	NC	\$1,752
10	CINCINNATI	2515	196	\$457,188	\$182	\$2,333	-\$365,724	-\$45	-\$5,431
10	DAYTON	4360	53	\$526,119	\$121	\$9,927	\$90,026	\$19	\$3,005
11	BATTLE CREEK	9017	397	\$997,944	\$111	\$2,514	-\$315,713	-\$42	-\$1,955
12	MILWAUKEE	4980	19	\$190,639	\$38	\$10,034	-\$59,424	-\$11	-\$3,859
12	NORTH CHICAGO	8654	290	\$1,138,095	\$132	\$3,924	\$216,902	\$17	\$575
12	TOMAH	3510	87	\$409,476	\$117	\$4,707	-\$73,244	-\$29	\$318
13	MINNEAPOLIS* ‡	545	11	\$73,628	\$135	\$6,693	-\$237,851	-\$552	\$204
14	CENTRAL IA HCS: Des Moines	1271	45	\$127,232	\$100	\$2,827	-\$198,132	-\$37	-\$2,102
14	CENTRAL IA HCS: Knoxville**	0	0	\$0	NA	NA	-\$398,541	NA	NA
15	EASTERN KS HCS: Topeka	8792	113	\$1,170,077	\$133	\$10,355	\$248,597	\$49	\$2,053
16	CENTRAL AR VETERANS HCS (No. Little Rock)	7049	256	\$732,437	\$104	\$2,861	-\$1,197,779	-\$145	-\$10,181
16	JACKSON	NR	122	\$275,077	NC	\$2,255	-\$129,352	NC	-\$981
16	NEW ORLEANS	2969	75	\$357,574	\$120	\$4,768	-\$482,063	-\$215	-\$3,714
17	CENTRAL TX VETERANS HCS: Waco	6187	105	\$1,173,073	\$190	\$11,172	\$347,637	\$74	\$4,773

Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility.

	FACILITY	FY 2000					DIFFERENCE: FY 2000 - FY 1997		
		#Of DAYS OF TREATMENT	# Of ADMISSIONS	DIRECT COST	COST PER DIEM	COST PER CAPITA	DIRECT COST	COST PER DEIM	COST PER CAPITA
19	DENVER	4355	213	\$525,253	\$121	\$2,466	-\$1,090,667	-\$167	-\$12,092
19	SHERIDAN**	0	0	\$0	NA	NA	-\$373,996	NA	NA
20	ALASKA HCS (Anchorage)**	0	0	\$0	NA	NA	-\$286,628	NA	NA
20	BOISE	913	24	\$275,577	\$302	\$11,482	-\$91,041	-\$111	-\$3,793
20	PUGET SOUND HCS: American Lake	5990	173	\$504,173	\$84	\$2,914	\$67,353	\$33	\$1,031
20	PUGET SOUND HCS: Seattle	4363	305	\$821,916	\$188	\$2,695	-\$154,168	-\$54	-\$706
20	ROSEBURG HCS	3164	110	\$280,908	\$89	\$2,554	-\$461,503	-\$135	-\$3,582
21	HILO	4193	52	\$1,028,683	\$245	\$19,782	\$267,673	\$51	\$11,327
21	PALO ALTO HCS	14689	244	\$1,960,381	\$133	\$8,034	-\$741,074	-\$45	-\$1,683
22	GREATER LOS ANGELES HCS: West LA**	0	0	\$0	NA	NA	-\$656,952	NA	NA
	ALL VA	175549	5106	\$23,804,532	\$136	\$4,662	-\$10,830,747	-\$15	-\$1,097

Note: No Specialized Intensive Program was open in VISN 9 or VISN 18 for these fiscal years.

NA=Not Applicable. NR=Not reported or not reported correctly. NC=Not calculated because data were not reported or unreliable.

‡ The baseline data for this site were recalculated to be more accurate.

* For this facility FY 1998 data were used as baseline for computing differences because FY 1997 data were missing for one or more components.

** The Specialized Intensive PTSD program(s) at the facility was closed for all of FY 2000.

PART IV: OUTCOME MONITORING OF SPECIALIZED INTENSIVE PTSD PROGRAMS

System-wide monitoring of health care outcomes has become an increasingly prominent feature of health care delivery in America, and will eventually constitute a cornerstone of the operation of the Department of Veterans Affairs health care system (Kizer, 1995, 1996; Veterans Health Administration, 1996). As our health care system has undergone a period of accelerating and unprecedented change, public officials, health care professionals, and the public have demanded objective evidence of the continuing quality and value of the care provided. Although controversial, health care “report cards” have been developed (and made public) by an increasing number of health care systems. The treatment of veterans suffering from Posttraumatic Stress Disorder (PTSD) due to their military experience is one of the highest VA priorities. In an earlier report (Fontana & Rosenheck, 1997b), we described our development of a report card for the treatment outcomes of the specialized intensive PTSD programs (SIPPs), as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. Readers who are interested in the technical aspects of the development of the report card should consult this earlier report (Fontana & Rosenheck, 1997b).

VISNs have been very active since FY 1996 in opening, closing and redesigning their intensive PTSD programs. At the same time, there has been increased interest in VA in comparing performance during the most recent fiscal year to a reference year. The changes in program design have made it infeasible for us to try to compare performance across fiscal years at the program level. Beginning with the Long Journey Home VII report (Fontana, Rosenheck et al., 1999), therefore, we shifted our presentation of performance data from the program level to the station level. In addition, we continued to present performance data at the VISN level as in the past. Also, we replaced the baseline and follow-up means for the current fiscal year with the risk-adjusted follow-up means for the current fiscal year so that the presentation will correspond with that in VA’s annual capacity report to Congress (cf., Office of Policy and Planning, 1999). We use FY 1996 as the reference year for all outcome indices except Work. Due to a change in the assessment of Work from dollars earned to days worked, the earliest that we have data available for the latter measure is FY 1998. FY 1998, therefore, became the reference year for days worked. Similarly, we began collecting data concerning veterans’ satisfaction with their treatment in FY 1997. That fiscal year, therefore, became the reference year for satisfaction.

In the sections that follow we describe the: (1) programs and time-period surveyed, (2) the stations surveyed and the adequacy of the data collected, (3) conditioning of the data to remove unwanted artifacts, (4) methods of risk-adjustment, (5) definition of the specific measures of outcome and the significance of these outcomes nationwide, (6) patient satisfaction with specialized PTSD treatment nationwide, (7) identification of stations whose outcomes or satisfaction are significantly better or worse than average, (8) deriving a report card for outcomes by synthesizing several indices into a single index, and (9) limitations to the monitoring methodology and data.

Programs and Time-Period Surveyed

The monitoring protocol covers all *intensive* specialized PTSD programs: inpatient, residential and PTSD Day Hospitals (outpatient). The types of residential and inpatient programs that are included are the Evaluation and Brief Treatment PTSD Units (EBTPUs), PTSD Residential Rehabilitation Programs (PRRPs) and Specialized Inpatient PTSD Units (SIPUs), including a PTSD Substance Abuse Unit and a Women's Trauma Recovery Program. More detailed descriptions of these programs can be found in previous NEPEC reports (Fontana, Rosenheck et al., 1993, 1995). Another change that we instituted in the Long Journey Home VII and subsequent reports is the definition of the time-period surveyed. In order to represent performance most accurately within a given fiscal year, we define the relevant performance to consist of clinical *outcomes* which occurred during the index fiscal year. The veterans comprising the sample for this report, therefore, are those whose four-month follow-up assessment after discharge was due during FY 2000. In all, there were 2,940 veterans who were enrolled in the monitoring protocol and were due for follow-up during FY 2000. Of these, 1,995 (68%) were actually followed-up.

Stations Surveyed and Adequacy of Data Collection

A total of 39 stations were surveyed. Confidence in conclusions drawn from our analyses rests upon the representativeness of the data upon which they are based. Representativeness is determined by the percentage of veterans who are followed up. The Special Emphasis Program goal for representativeness is a minimum of a 50% follow-up (VHA Directive 96-051, Program Measure #1). The number due for follow-up, the number actually followed up, and the percentage followed up are presented in Table 4-1 for each station. Data from the 31 stations meeting the minimum goal of 50% were retained for analyses of outcomes and satisfaction. These data included 2,464 veterans, 1,797 of whom were followed up (73%). Data from the 8 stations failing to meet the SEP goal were deemed to be inadequate for providing representative conclusions and were not included in the analyses. For informational purposes, raw means for the outcome measures, unadjusted for risk factors or baseline levels, are presented in Table D-1 of Appendix D for the 8 stations submitting inadequate data.

Conditioning the Data

Several procedures are in place to ensure that the data are maximally complete and accurate. The first step for a program new to the monitoring protocol is to designate one person (an evaluation director) who has overall responsibility for the implementation and ongoing operation of the protocol by program staff, and another person (a data manager) who has day to day responsibility for the data collection and the submission of data to NEPEC. Each of these persons is sent a written manual describing the evaluation procedures, and the manual is reviewed orally with them by a member of the NEPEC staff. When data are submitted to NEPEC, they are put through a series of computerized screens for accuracy of answers and for timeliness of submission. Letters explaining errors and identifying overdue forms are mailed to

the data manager of each program each week. NEPEC staff edit the data with the correct information as it is returned by the field staff. In order to maximize the quality and quantity of data, NEPEC staff follow up these letters with telephone calls to data managers and evaluation directors as needed. In cases where problems in participation in the monitoring protocol persist, letters detailing the problems are sent to medical center and/or VISN authorities requesting their assistance.

Correcting for Regression to the Mean

Once the data have been made maximally complete and accurate, one other step is necessary to condition them for analysis. Regression to the mean is one of the artifacts potentially affecting longitudinal data. Regression to the mean refers to the fact that scores at time 1 are often found to be closer to the mean at time 2, due to the less than perfect test-retest reliability of the measuring instrument. In situations where people start out more deviantly than the norm (as is often the case with psychiatric patients entering treatment), some of the movement toward the norm over time may be due to regression to the mean rather than to the treatment programs themselves. Data can be examined to determine if substantial regression to the mean has occurred by correlating the scores at time 1 with the change from time 1 to time 2. If the correlation is statistically significant, substantial regression to the mean has occurred (cf., Speer, 1992). Examination of the monitoring data in this manner reveals that they are affected by regression to the mean. We remove the component of change attributable to regression to the mean, therefore, by transforming raw scores into “true scores” using the method of Jacobson & Truax (1991). True scores are derived by adjusting raw scores for the test-retest reliability of the measuring instrument according to the formula

$$T_j = \text{Rel}(X_j) + (1 - \text{Rel})M$$

where T represents the true score, Rel is the test-retest reliability, X is the raw score, and M is the mean.

Values for the test-retest reliabilities were obtained from an earlier study of specialized outpatient treatment for PTSD (Fontana & Rosenheck, 1996b). In this study, a stabilization period of symptoms and social functioning was observed beginning four months after the initiation of treatment. The correlations across a four-month interval during this period of no change in the levels of symptoms or social functioning were used as the test-retest reliabilities. All analyses were performed on true scores, thereby maximizing the sensitivity of the analyses to programmatically induced change. True-scored follow-up means, adjusted for risk factors (see Risk Adjustment below), are presented for the six outcome indices for each VISN and station in Tables 4-2 through 4-13.

Determining the Quality of Outcomes

VHA Directive 96-051 specifies outcome goals for PTSD, substance abuse, and work in Population Measures 1, 2 and 3. We have introduced some technical modifications to the determination of whether these goals are met so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kaspro et al., 1997; Seibyl et al., 1997). In addition, we have added violence as Population Measure 6, because it is the single most important disruption to social functioning. These changes have been instituted with the approval of the Clinical Quality Improvement Specialist in the Office of Performance and Quality, VA Headquarters.

As with the vast majority of medical conditions, absolute outcome standards have not been established for the treatment of PTSD. In the absence of such standards, we use the performance of the median VISN and median station nationwide as the reference point for evaluating the performance of the other VISNs and stations. For each clinical outcome and patient satisfaction, the risk-adjusted value for the median VISN or station is adopted as the reference point. The SEP goal for each measure of clinical outcome is that the outcome not be significantly worse than that of the median, or reference, VISN or station.

Risk Adjustment

A major challenge for all outcome monitoring efforts is posed by the inevitable differences among veterans treated at various stations at the time of admission. Such differences in sociodemographic and clinical characteristics can have a substantial influence on the amount of change that occurs during treatment. In addition, our inspection of prior data suggested that differences in the conditions under which data are collected at follow-up might affect outcomes differentially across stations. As of January 8, 1999 we modified our follow-up instrument so as to include questions concerning the conditions under which the data were collected. We found that if the follow-up data were collected by clinicians associated with the programs either in face-to-face contact or over the telephone, veterans' reports of their outcomes and their satisfaction were significantly higher than if the data were collected by mail or by face-to-face contact or telephone by nonclinicians who were associated with the programs. We recommend, therefore, that follow-up data *not* be collected by clinicians who are associated with the programs.

As a result of these influences, outcomes cannot be compared simply and directly across VISNs or stations without adjusting for these influences. The procedure for doing this is commonly referred to as risk adjustment (Iezzoni, 1995). Thus, the average outcome and satisfaction at each individual VISN or station is compared to that of the median VISN or station, after statistical adjustment for differences in patient characteristics at admission and conditions of follow-up data collection using multivariate methods. Individual VISNs or stations performing significantly better or worse than their respective median counterparts are identified for each outcome measure and satisfaction.

The first step in this analytic process is to regress the scores at four-months post-discharge on the scores at admission to produce a set of residual outcome scores. These residual scores represent outcomes adjusted for admission levels. Residual scores for each of the six outcome variables are then correlated with 25 different sociodemographic and clinical characteristics at the time of admission and with an index ordering the conditions of data collection at follow-up.

In the data set for this report, 13 characteristics were found to be correlated significantly ($p < .10$) with the residual scores for two or more of the outcome variables and, therefore, were retained for use as risk-adjusters in subsequent analyses. These characteristics are veterans' age, being married, having a history of incarceration, working for pay at the time of admission, having served in a war zone, having received friendly or hostile fire, having participated in atrocities during wartime, having witnessed atrocities aside from participating in them, number of comorbid disorders, having current medical problems, having a history of hospitalization for psychiatric disorder or substance abuse, having had previous specialized PTSD treatment, and the follow-up data having been collected by a clinician associated with the program. Four characteristics were found to be correlated significantly with the satisfaction ratings and were retained for use as risk-adjusters for analyses involving satisfaction: age, working for pay at the time of admission, having participated in atrocities during wartime, and the follow-up data having been collected by a clinician associated with the program.

The next step in the analyses was to use analysis of covariance to generate risk-adjusted follow-up means for VISNs and stations for each clinical outcome and patient satisfaction. Then multiple regression analysis is employed to compare the outcomes and satisfaction for all VISNs or stations to that of the median VISN or station for each outcome and satisfaction. This analysis produced a regression coefficient for each VISN or station, representing the number of scale points that that VISN or station deviated from its median counterpart after risk adjustment. The scale points for clinical outcomes and satisfaction are presented in the metrics of the instruments used to measure them.

The regression coefficients are presented for outcomes in Tables 4-2 through 4-13 and for satisfaction in Tables 4-16 and 4-17 as the "Deviation of the Mean from the Median." Significance levels represent the probability that each deviation could have occurred by chance. For ease of identification, those VISNs and stations whose outcomes or satisfaction are significantly worse than that of their median counterpart are marked by an "X". As noted above, outcomes which are significantly worse than that of the median for the Short Mississippi Scale (Tables 4-2 and 4-3), the ASI Composite for Alcohol Abuse (Tables 4-6 and 4-7), the ASI Composite for Drug Abuse (Tables 4-8 and 4-9), or for Work (Tables 4-12 and 4-13) do not meet the goals for Population Measures 1, 2 and/or 3 in VHA Directive 96-051 as modified above.

Measures of Outcome

The baseline data for outcomes monitoring are collected by a self-report questionnaire at the time of admission to specialized PTSD treatment, and follow-up data by a parallel questionnaire four months after discharge. (Details of the monitoring protocol, the quality control procedures at NEPEC, and copies of the data collection forms can be found in Fontana and Rosenheck, 1997b.) Outcome is defined as the *change* in symptoms and functioning from the month preceding admission to the month preceding the four-month follow-up and is assessed in five domains: 1) PTSD symptoms, 2) alcohol abuse, 3) drug abuse, 4) violence, and 5) work.

PTSD Symptoms

Due to their particular significance in these specialized programs, PTSD symptoms are measured by two instruments: the Short Form of the Mississippi Scale for Combat-Related PTSD that has been validated in a large sample of outpatients (Fontana & Rosenheck, 1994) and a four-item PTSD Scale that has been specially constructed for program monitoring to assess: 1) intrusive thoughts, flashbacks or nightmares, 2) avoidance of reminders of the war, 3) feelings of numbness or emotional distance from other people, and 4) sleep disturbances, irritability or hyperarousal (Cronbach alpha=0.67). For the SIPPs nationally, there was significant improvement in PTSD ($p<.0001$) as measured by both instruments. The true-scored Short Mississippi Scale decreased by 1.88 points (4.59%) from 40.98 to 39.10; and the true-scored PTSD Scale decreased by 1.01 points (5.92%) from 17.05 to 16.04. Both decreases are significant at $p<.0001$. The average length of stay in the SIPPs nationally was 41.63 days ($sd=23.13$). Neither of these changes in PTSD symptoms were correlated significantly ($p<.05$) with length of stay: $r=-.04$ for the Short Mississippi Scale and $r=-.04$ for the PTSD Scale.

Alcohol Abuse and Drug Abuse

Alcohol abuse and drug abuse are measured by the composite indices from the Addiction Severity Index (McLellan et al., 1985), a widely used and well-validated measure of substance abuse outcomes. Nationally, there was a significant *increase* in alcohol abuse ($p<.0006$), and no significant change in drug abuse ($p>.10$). The true-scored alcohol abuse composite increased by .009 points (7.26%) from .124 to .133; while the true-scored drug abuse composite increased by only .002 points (4.0%) from .050 to .052. Neither change in substance abuse was correlated significantly with length of stay: $r=-.03$ for alcohol abuse and $r=-.03$ for drug abuse.

Violence

Violence is measured by four items that were adapted from the National Vietnam Veterans Readjustment Study (Kulka et al., 1990): 1) destruction of property, 2) threatening someone with physical violence without a weapon, 3) threatening someone with a weapon, and 4) physically fighting with someone (Cronbach alpha=0.71). Nationally, the true-scored violence scale decreased significantly ($p<.0001$) by .56 points (35.67%) from 1.57 to 1.01. The decrease in violence was not correlated significantly with length of stay ($r=-.03$).

Work

Work is measured as the number of days employed for pay during the 30 days preceding the interview. Nationally, there was a significant *decrease* in true-scored work outcomes ($p < .0001$). The true-scored number of days worked during the past 30 days decreased by 1.06 (30.81%) from 3.44 to 2.38 days. The decrease in days worked was not correlated significantly with length of stay ($r = -.04$).

Satisfaction with Services

The follow-up questionnaire was modified in June 1996 to permit the monitoring of veterans' satisfaction with the clinical services received. Four items, scored on 4-point and 5-point Likert scales, cohered as a highly internally consistent cluster (Cronbach alpha = .84). These items, based on the work of Attkisson et al. (1983), asked the veterans how satisfied they were with the care they received from the specialized PTSD program, how they would rate the care they received from the specialized PTSD program, whether they would choose to go to the specialized PTSD program again if they needed treatment, and whether they would recommend the specialized PTSD program to other veterans if they needed treatment. Satisfaction scores can range from 4 to 18. A mid-point score of 11 represents equally satisfied and dissatisfied ratings. Nationally, veterans gave the SIPP a rating of 15.62, indicating that overall they were satisfied with services. Satisfaction was correlated significantly with greater lengths of stay ($r = .17$, $p < .0001$).

Satisfaction is an important dimension of quality of care in its own right. Only 10% of the explained variance in satisfaction ratings can be attributed to improved outcomes (Fontana & Rosenheck, in press). Satisfaction and outcomes, therefore, should be considered as largely separate dimensions of quality of care.

A Report Card for Outcomes

Although performance assessment of PTSD treatment clearly requires consideration of multiple outcome domains, the complex results do not allow summary assessment of the performance of each station. The six outcome variables are therefore combined into a single index, analogous to the cumulative grade-point average, on a report card of outcome performance. To accomplish this synthesis, we had to resolve two questions: 1) how to combine the regression coefficients when they were derived from variables that were measured with different metrics, and 2) what weight to give the regression coefficients for the different variables in combining them.

We resolved the first problem by using the *standardized* regression coefficients for deviations from the median VISN or station. This converts the different metrics for each variable into the common metric of standard scores. In addition, this method has the advantage of taking the actual sample sizes and variabilities of the individual VISNs and stations into account.

Additionally, we reversed the sign of the coefficient for Work so that the direction was the same as for symptoms, substance abuse and violence.

We resolved the second problem by giving the combined value of the two PTSD symptom outcomes equal weight to the combined value of the other four outcomes. This weighting was decided upon after consultation with national experts in PTSD treatment and VHA headquarters. There was a consensus that while a diverse range of outcomes was desirable, the specialized nature of these programs as PTSD programs warranted a heavier emphasis on the outcomes for PTSD symptoms than for other outcomes.

The standardized coefficients for the Short Mississippi Scale and the NEPEC PTSD Scale were thus summed and averaged, as were the standardized coefficients for Alcohol Abuse, Drug Abuse, Violence and Work. These two averages were themselves averaged to produce the Standardized Combined Mean for all the outcomes. Finally, the Standardized Combined Mean was ranked, with the lowest ranks assigned to VISNs and stations with the best outcomes and the highest ranks assigned to those with the worst outcomes. The ranks constitute a report card of the goodness of VISNs' and stations' outcome performance represented as a single index. These data can be found in Tables 4-14 and 4-15.

A Report Card for Satisfaction

The mean risk-adjusted satisfaction ratings are presented in Table 4-16 by VISN and in Table 4-17 for stations. Comparison of each VISN and station to its median counterpart yields deviation scores with associated significance levels. The deviation scores represent the number of satisfaction scale points that the satisfaction rating for each VISN or station differs from the satisfaction rating of the median VISN or station. VISNs and stations are ranked by their standardized deviation from the median from highest to lowest to provide an index comparable to the single index for outcomes. These data are presented in Tables 4-16 and 4-17.

Limitations to the Monitoring Methodology

Several limitations of the data presented here deserve comment and consideration. First, it must be acknowledged that although this report presents one of the largest outcome assessment efforts of its type, the numbers of cases and the follow-up rates from some individual stations are smaller than optimal, even among those included in the comparisons as having submitted adequate data. Moreover, we are disappointed that of the 8 stations that did not submit sufficient data to be included in the comparisons, 7 have programs that are still in operation and represent 18% of the population of programs to be monitored. For these 7 stations, we are unable to make any reasonably stable or representative determination of either clinical outcomes or veterans' satisfaction with services. We are hopeful that data collection will improve as VHA leadership continues to emphasize the value of the information available through the monitoring effort to the maintenance and improvement of the quality of clinical services in the new VA.

Second, it must be acknowledged that statistical risk adjustment, although widely used, is imperfect, and can never be as effective as random assignment in establishing equivalent groups. Since it will never be possible to randomly assign patients living in different localities to health care facilities (VA or otherwise), however, clinical performance evaluation must continue to develop within the limits of available risk adjustment technologies.

Third, instrumentation in large-scale outcome assessment efforts must be economical, and, in the area of psychiatric assessment, must typically rely on self-report data which are subject to misrepresentation. Some clinicians have expressed the specific concern that patients may underreport their improvement out of fear that reporting improvement will jeopardize their compensation status. The instruments used in the current effort have well-established psychometric properties and were selected because of their consistency with results that were found using more extensive assessment batteries in smaller scale studies (Fontana & Rosenheck, 1996a). Moreover, we conducted a study of the effects of compensation-seeking on treatment outcomes and found that there was no evidence of such effects among outpatients and among inpatients in programs of short to moderate lengths of stay (Fontana & Rosenheck, 1998). Only in long-stay programs (averaging 100 days) was there evidence of a significant compensation-seeking bias on outcomes. This compensation-seeking effect, along with generally poorer outcomes and poorer ratings of satisfaction, led us to suggest consideration of avoiding the implementation of long-stay programs.

Fourth, as noted above, only limited data are available on the nature of services delivered during intensive treatment, and no information is available on the quality of aftercare services. While this information might help to account for weaker outcomes at some stations, it would not alter the basic assessment of outcomes presented in this report. For a responsible, patient-oriented treatment agency, inpatient care cannot be divorced from outpatient care even if the care is delivered through a different health care system. At this stage in the development of methods for outcomes monitoring, we do not yet have the tools to both identify problems and present definitive solutions. At this time, comparative outcome data can only suggest broad directions for improvement. Treatment modification and development must be based on clinical and administrative experience, and on familiarity with the patients and operating circumstances confronting each station.

Further Analyses and the Commitment to Quality

We plan to conduct further analyses to determine the possible role of various treatment factors in contributing to superior outcomes. Primary among them are length of stay, size of program and use of medications. In addition, we are nearing completion of data collection for an intensive evaluation of the outcomes of the Women's Stress Disorder Treatment Teams. Also, in collaboration with the National Center for PTSD, we are developing a monitoring protocol for assessing the outcomes of specialized outpatient programs.

Providing effective treatment of military-related PTSD is a major priority for the Veterans Health Administration. Although techniques of outcomes monitoring and assessment are in an early stage of development, the implementation of a nationwide effort to assess outcomes of intensive treatment of PTSD is a major accomplishment for VA, and reflects a commitment in the new VA to maintaining high levels of quality, accountability, and health care value.

Table 4-1. Adequacy of Data

VISN	Station	# Follow-Ups Due in FY'00	# Follow-Ups Due that were Obtained	% Follow-Ups Due that were Obtained*	
1	Northampton	31	27	87	
1	Togus	50	35	65	
1	West Haven	26	16	62	
1	White River Junction	48	31	65	
2	Batavia (Buffalo)	82	73	89	
3	Lyons	152	69	45	X
3	Montrose	51	19	37	X
4	Clarksburg	47	29	62	
4	Coatesville	147	105	71	
5	Baltimore	62	28	45	X
5	Martinsburg	97	44	45	X
6	Salem	65	60	92	
6	Salisbury	82	76	93	
7	Augusta**	70	55	79	
7	Tuscaloosa	145	122	84	
8	Bay Pines	70	66	94	
8	Miami	51	48	94	
9					
10	Brecksville (Cleveland)	41	39	95	
10	Cincinnati	79	41	52	
10	Dayton	48	34	71	
11	Battle Creek	86	53	62	
12	Milwaukee	16	4	25	X
12	North Chicago	148	103	70	
12	Tomah	53	35	66	
13	Minneapolis	15	5	33	X
14	Des Moines	29	24	83	
15	Topeka	100	65	65	
16	Jackson	35	28	80	
16	New Orleans	46	45	98	
16	North Little Rock	212	136	64	
17	Waco	74	62	84	
18					
19	Denver	42	29	69	
19	Sheridan**	33	6	18	X
20	American Lake (Tacoma)	86	66	77	
20	Boise	23	21	91	
20	Roseburg	68	39	57	
20	Seattle	161	109	68	
21	Hilo	50	23	46	X
21	Palo Alto	219	125	57	
22					
ALL VA		2940	1995	68%	

* Program Measure #1 for PTSD in VHA Directive 10-96-051. X indicates that SEP goal was not met and that data were not adequate for representative comparison with other stations.

** Program was closed for all or part of FY 2000.

Table 4-2. Follow-Up Means for PTSD (Short Miss.) Adjusted for Covariates by VISN

VISN	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	40.92	39.86	-1.06	0.45	0.006
2	37.93	40.21	2.28	0.80	
3	36.56				
4	37.35	37.38	0.03	-2.03	
5	40.31				
6	39.59	39.27	-0.32	-0.15	
7	41.09	39.57	-1.52	0.15	
8	40.70	39.63	-1.07	0.22	
9	42.09				
10	40.07	39.81	-0.26	0.40	
11	38.10	40.51	2.41	1.10	0.03
12	39.92	39.33	-0.59	-0.09	
13	41.46				
14	36.19	36.85	0.66	-2.56	
15	38.13	39.09	0.96	-0.32	
16	40.01	40.59	0.58	1.18	
17	37.35	36.78	-0.57	-2.63	
18	40.54				
19	38.84	36.20	-2.64	-3.22	
20	38.87	37.52	-1.35	-1.90	
21#	38.89	39.41	0.52	0.00	0.002
22	35.27				
ALL VA	39.01	39.10	0.09		

Indicates the median VISN for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse ($p < .05$) than the median VISN; SEP goal was not met.

Table 4-3. Follow-Up Means for PTSD (Short Miss.) Adjusted for Covariates by Station

VISN	Station	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	Northampton	40.14	38.42	-1.72	-1.45	
1	Togus	41.07	40.35	-0.72	0.49	
1#	West Haven	41	39.86	-1.14	0.00	
1	White River Junction	41.49	40.08	-1.41	0.22	
2	Batavia (Buffalo)	37.83	40.28	2.45	0.41	
3	Bronx	38.94				
3	Lyons	35.27				
3	Montrose	38.24				
4	Clarksburg	33.1	41.96	8.86	2.10	
4	Coatesville	41.13	35.05	-6.08	-4.81	0.0006
5	Baltimore	40.4				
5	Martinsburg	40.44				
6	Salem	40.73	40.55	-0.18	0.69	
6	Salisbury	37.29	38.10	0.81	-1.76	
7	Augusta	42.03	40.88	-1.15	1.01	
7	Tuscaloosa		39.29		-0.57	
7	Tuskegee	39.38				
8	Bay Pines	41.93	40.06	-1.87	0.19	
8	Miami	39.4	39.32	-0.08	-0.54	
9	Louisville	41.92				
10	Brecksville (Cleveland)	39.26	39.13	-0.13	-0.73	
10	Cincinnati	40.77	39.94	-0.83	0.08	
10	Dayton	39.16	40.73	1.57	0.86	
11	Battle Creek	38.11	40.62	2.51	0.76	
12	Milwaukee	36.7				
12	North Chicago	39.34	39.39	0.05	-0.47	
12	Tomah	41.45	40.11	-1.34	0.25	
13	Minneapolis	41.44				
14	Des Moines	31.82	36.41	4.59	-3.46	0.04
14	Knoxville	41.9				
15	Topeka	38.18	38.61	0.43	-1.25	
16	Jackson	40.94	41.87	0.93	2.01	
16	New Orleans	39.98	37.94	-2.04	-1.92	
16	North Little Rock	39.74	41.43	1.69	1.57	
17	Temple	39.55				
17	Waco	36.71	36.75	0.04	-3.12	0.04
18	Phoenix	40.59				
19	Denver	38.33	35.21	-3.12	-4.65	0.004
19	Sheridan	39.47				
20	American Lake	40.44	40.62	0.18	0.76	
20	Anchorage	34.55				
20	Boise	42.46	37.44	-5.02	-2.43	
20	Portland	39.75				
20	Roseburg	35.25	40.54	5.29	0.68	
20	Seattle	39.96	34.67	-5.29	-5.19	0.0004
21	Hilo	39.92				
21	Palo Alto	38.44	39.52	1.08	-0.34	
21	San Francisco	41.13				
22	West Los Angeles	35.38				
ALL VA		39.01	39.10	0.09		

Indicates the median station for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse ($p < .05$) than the median station; SEP goal was not met.

No station was significantly worse than the median station for FY'00.

Table 4-4. Follow-Up Means for PTSD (NEPEC Scale) Adjusted for Covariates by VISN

VISN	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	16.86	16.34	-0.52	0.33	0.003
2	16.29	16.36	0.07	0.35	
3	15.31				
4	15.86	15.12	-0.74	-0.89	
5	16.68				
6	15.98	15.62	-0.36	-0.39	
7	17.14	16.38	-0.76	0.37	
8	16.96	16.25	-0.71	0.24	
9	17.66				
10	16.53	16.35	-0.18	0.34	
11	15.95	16.61	0.66	0.60	0.02
12#	16.39	16.01	-0.38	0.00	
13	16.86				
14	14.40	15.42	1.02	-0.59	
15	15.73	15.69	-0.04	-0.32	
16	16.60	16.58	-0.02	0.57	
17	15.60	15.78	0.18	-0.24	
18	16.63				
19	16.30	15.95	-0.35	-0.06	
20	16.13	15.64	-0.49	-0.37	
21	16.29	16.17	-0.12	0.16	
22	13.91				
ALL VA	16.15	16.04	-0.11		

Indicates the median VISN for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-5. Follow-Up Means for PTSD (NEPEC Scale) Adjusted for Covariates by Station

VISN	Station	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	Northampton	17.12	16.35	-0.77	0.12	
1	Togus	16.87	16.79	-0.08	0.56	
1	West Haven	16.76	16.01	-0.75	-0.22	
1	White River Junction	16.92	15.93	-0.99	-0.30	
2	Batavia (Buffalo)	16.27	16.40	0.13	0.17	
3	Bronx	15.81				
3	Lyons	15.04				
3	Montrose	15.59				
4	Clarksburg	14.80	16.96	2.16	0.73	
4	Coatesville	16.80	14.09	-2.71	-2.14	0.0001
5	Baltimore	16.70				
5	Martinsburg	16.76				
6	Salem	16.06	15.45	-0.61	-0.79	0.04
6	Salisbury	15.84	15.70	-0.14	-0.53	
7	Augusta	17.57	16.99	-0.58	0.76	X 0.05
7	Tuscaloosa		16.23		0.00	
7	Tuskegee	16.41				
8#	Bay Pines	16.94	16.23	-0.71	0.00	
8	Miami	16.94	16.42	-0.52	0.19	
9	Louisville	17.59				
10	Brecksville (Cleveland)	15.96	16.15	0.19	-0.08	
10	Cincinnati	16.92	16.50	-0.42	0.27	
10	Dayton	16.18	16.53	0.35	0.30	
11	Battle Creek	15.96	16.67	0.71	0.44	
12	Milwaukee	13.97				
12	North Chicago	16.42	16.13	-0.29	-0.10	
12	Tomah	17.00	16.14	-0.86	-0.09	
13	Minneapolis	16.87				
14	Des Moines	12.27	15.21	2.94	-1.02	0.04
14	Knoxville	17.15				
15	Topeka	15.74	15.49	-0.25	-0.74	0.05
16	Jackson	16.82	17.01	0.19	0.78	
16	New Orleans	17.09	16.03	-1.06	-0.20	
16	North Little Rock	16.33	16.78	0.45	0.55	
17	Temple	16.08				
17	Waco	15.45	15.75	0.30	-0.48	
18	Phoenix	16.66				
19	Denver	16.36	15.48	-0.88	-0.75	
19	Sheridan	16.13				
20	American Lake (Tacoma)	16.43	16.95	0.52	0.71	X 0.05
20	Anchorage	15.24				
20	Boise	16.95	15.40	-1.55	-0.83	
20	Portland	16.54				
20	Roseburg	14.66	16.74	2.08	0.51	
20	Seattle	16.62	14.57	-2.05	-1.66	0.0001
21	Hilo	15.84				
21	Palo Alto	16.18	16.23	0.05	0.00	
21	San Francisco	16.94				
22	West Los Angeles	13.92				
ALL VA		16.15	16.04	-0.11		

Indicates the median station for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse ($p < .05$) than the median station; SEP goal was not met.

Table 4-6. Follow-Up Means for Alcohol Abuse (ASI) Adjusted for Covariates by VISN

VISN	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	0.17	0.14	-0.03	0.00	0.02
2	0.18	0.13	-0.05	0.00	
3	0.14				
4	0.17	0.16	-0.01	0.03 X	
5	0.16				
6	0.15	0.14	-0.01	0.00	
7	0.16	0.12	-0.04	-0.01	
8	0.17	0.13	-0.04	-0.01	
9	0.15				
10	0.18	0.11	-0.07	-0.02	
11	0.17	0.14	-0.03	0.00	
12	0.16	0.14	-0.02	0.00	
13	0.18				
14	0.18	0.10	-0.08	-0.04	
15	0.16	0.14	-0.02	0.00	
16	0.17	0.13	-0.04	0.00	
17	0.15	0.12	-0.03	-0.01	
18	0.17				
19	0.16	0.11	-0.05	-0.02	
20	0.16	0.14	-0.02	0.00	
21#	0.20	0.13	-0.07	0.00	
22	0.14				
ALL VA	0.16	0.13	-0.03		

Indicates the median VISN for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse ($p < .05$) than the median VISN; SEP goal was not met.

Table 4-7. Follow-Up Means for Alcohol Abuse (ASI) Adjusted for Covariates by Station

VISN	Station	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	Northampton	0.15	0.16	0.01	0.03	
1	Togus	0.17	0.14	-0.03	0.02	
1	West Haven	0.19	0.10	-0.09	-0.03	
1	White River Junction	0.18	0.14	-0.04	0.01	
2	Batavia (Buffalo)	0.18	0.13	-0.05	0.01	
3	Bronx	0.17				
3	Lyons	0.13				
3	Montrose	0.13				
4	Clarksburg	0.14	0.12	-0.02	-0.01	
4	Coatesville	0.20	0.18	-0.02	0.06	X 0.0002
5	Baltimore	0.17				
5	Martinsburg	0.16				
6	Salem	0.14	0.15	0.01	0.02	
6	Salisbury	0.17	0.13	-0.04	0.00	
7	Augusta	0.16	0.15	-0.01	0.02	
7	Tuscaloosa		0.11		-0.02	
7	Tuskegee	0.16				
8	Bay Pines	0.17	0.12	-0.05	0.00	
8	Miami	0.17	0.13	-0.04	0.00	
9	Louisville	0.14				
10	Brecksville (Cleveland)	0.16	0.12	-0.04	-0.01	
10	Cincinnati	0.19	0.10	-0.09	-0.02	
10	Dayton	0.18	0.12	-0.06	-0.01	
11	Battle Creek	0.17	0.14	-0.03	0.01	
12	Milwaukee	0.11				
12#	North Chicago	0.16	0.13	-0.03	0.00	
12	Tomah	0.17	0.17	0.00	0.04	X 0.02
13	Minneapolis	0.18				
14	Des Moines	0.18	0.10	-0.08	-0.02	
14	Knoxville	0.18				
15	Topeka	0.16	0.14	-0.02	0.01	
16	Jackson	0.17	0.12	-0.05	-0.01	
16	New Orleans	0.15	0.10	-0.05	-0.02	
16	North Little Rock	0.18	0.14	-0.04	0.01	
17	Temple	0.14				
17	Waco	0.15	0.12	-0.03	0.00	
18	Phoenix	0.17				
19	Denver	0.16	0.12	-0.04	-0.01	
19	Sheridan	0.15				
20	American Lake (Tacoma)	0.16	0.16	0.00	0.03	X 0.03
20	Anchorage	0.18				
20	Boise	0.16	0.10	-0.06	-0.03	
20	Portland	0.14				
20	Roseburg	0.16	0.15	-0.01	-0.01	
20	Seattle	0.17	0.14	-0.03	0.01	
21	Hilo	0.25				
21	Palo Alto	0.19	0.13	-0.06	0.01	
21	San Francisco	0.22				
22	West Los Angeles	0.14				
ALL VA		0.16	0.13	-0.03		

Indicates the median station for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-8. Follow-Up Means for Drug Abuse (ASI) Adjusted for Covariates by VISN

VISN	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	0.07	0.06	-0.01	0.00	
2	0.08	0.05	-0.03	0.00	
3	0.06				
4	0.08	0.06	-0.02	0.01	
5	0.07				
6#	0.06	0.05	-0.01	0.00	
7	0.07	0.05	-0.02	-0.01	
8	0.07	0.04	-0.03	-0.01	0.04
9	0.05				
10	0.07	0.04	-0.03	-0.01	0.02
11	0.07	0.06	-0.01	0.00	
12	0.07	0.06	-0.01	0.00	
13	0.08				
14	0.08	0.04	-0.04	-0.02	0.05
15	0.06	0.06	0.00	0.00	
16	0.07	0.05	-0.02	-0.01	
17	0.06	0.04	-0.02	-0.01	0.03
18	0.07				
19	0.07	0.05	-0.02	-0.01	
20	0.07	0.06	-0.01	0.00	
21	0.09	0.06	-0.03	0.00	
22	0.07				
ALL VA	0.07	0.05	-0.02		

Indicates the median VISN for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse ($p < .05$) than the median VISN; SEP goal was not met.
No station was significantly worse than the median station for FY'00.

Table 4-9. Follow-Up Means for Drug Abuse (ASI) Adjusted for Covariates by Station

VISN	Station	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	Northampton	0.06	0.05	-0.01	0.00	X 0.3
1	Togus	0.07	0.07	0.00	0.02	
1	West Haven	0.08	0.06	-0.02	0.01	
1	White River Junction	0.07	0.05	-0.02	0.00	
2	Batavia (Buffalo)	0.08	0.05	-0.03	0.00	
3	Bronx	0.08				
3	Lyons	0.06				
3	Montrose	0.06				
4	Clarksburg	0.06	0.04	-0.02	-0.01	X 0.007
4	Coatesville	0.09	0.07	-0.02	0.02	
5	Baltimore	0.07				
5	Martinsburg	0.07				
6	Salem	0.06	0.06	0.00	0.01	
6#	Salisbury	0.07	0.05	-0.02	0.00	
7	Augusta	0.07	0.06	-0.01	0.01	
7	Tuscaloosa		0.04		-0.01	
7	Tuskegee	0.07				0.03
8	Bay Pines	0.07	0.04	-0.03	-0.01	
8	Miami	0.07	0.05	-0.02	0.00	
9	Louisville	0.05				
10	Brecksville (Cleveland)	0.07	0.04	-0.03	-0.01	
10	Cincinnati	0.07	0.04	-0.03	-0.01	
10	Dayton	0.08	0.05	-0.03	0.00	
11	Battle Creek	0.07	0.06	-0.01	0.01	
12	Milwaukee	0.05				X 0.05
12	North Chicago	0.07	0.05	-0.02	0.00	
12	Tomah	0.06	0.07	0.01	0.02	
13	Minneapolis	0.08				
14	Des Moines	0.08	0.04	-0.04	-0.01	
14	Knoxville	0.08				
15	Topeka	0.06	0.06	0.00	0.01	
16	Jackson	0.07	0.04	-0.03	-0.01	
16	New Orleans	0.07	0.04	-0.03	-0.01	
16	North Little Rock	0.08	0.05	-0.03	0.00	
17	Temple	0.06				
17	Waco	0.06	0.04	-0.02	-0.01	
18	Phoenix	0.07				
19	Denver	0.07	0.05	-0.02	0.00	
19	Sheridan	0.06				
20	American Lake (Tacoma)	0.07	0.05	-0.02	0.00	
20	Anchorage	0.07				
20	Boise	0.08	0.05	-0.03	0.00	
20	Portland	0.06				
20	Roseburg	0.07	0.06	-0.01	0.01	
20	Seattle	0.07	0.06	-0.01	0.01	
21	Hilo	0.06				
21	Palo Alto	0.09	0.06	-0.03	0.01	
21	San Francisco	0.10				
22	West Los Angeles	0.07				
ALL VA		0.07	0.05	-0.02		

Indicates the median station for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-10. Follow-Up Means for Violence Adjusted for Covariates by VISN

VISN	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	1.37	1.10	-0.27	0.14	
2	1.23	1.11	-0.12	0.14	
3	0.96				
4	1.30	0.90	-0.40	-0.06	
5	1.30				
6	1.19	0.84	-0.35	-0.12	
7	1.16	1.12	-0.04	0.16	X 0.03
8	1.39	1.11	-0.28	0.15	
9	1.61				
10	1.44	1.22	-0.22	0.26	X 0.002
11	1.17	1.10	-0.07	0.13	
12	1.29	0.89	-0.40	-0.07	
13	1.61				
14	1.10	0.54	-0.56	-0.43	0.007
15	1.13	1.07	-0.06	0.10	
16	1.23	1.12	-0.11	0.15	X 0.03
17	1.07	0.88	-0.19	-0.08	
18	1.45				
19	1.23	0.82	-0.41	-0.14	
20#	1.20	0.96	-0.24	0.00	
21	1.25	0.93	-0.32	-0.03	
22	0.81				
ALL VA	1.23	1.01	-0.22		

Indicates the median VISN for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse (p<.05) than the median VISN; SEP goal was not met.

Table 4-11. Follow-Up Means for Violence Adjusted for Covariates by Station

VISN	Station	FY 1996 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'96	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	Northampton	1.38	0.88	-0.50	-0.21	0.02
1#	Togus	1.44	1.09	-0.35	0.00	
1	West Haven	1.25	1.31	0.06	0.22	
1	White River Junction	1.57	1.14	-0.43	0.05	
2	Batavia (Buffalo)	1.23	1.11	-0.12	0.02	
3	Bronx	1.39				
3	Lyons	0.80				
3	Montrose	1.08				
4	Clarksburg	0.90	1.24	0.34	0.15	
4	Coatesville	1.67	0.72	-0.95	-0.37	
5	Baltimore	1.44				0.003
5	Martinsburg	1.25				
6	Salem	1.30	0.85	-0.45	-0.24	
6	Salisbury	1.01	0.85	-0.16	-0.26	
7	Augusta	1.03	1.30	0.27	0.21	
7	Tuscaloosa		1.06		-0.03	
7	Tuskegee	1.41				
8	Bay Pines	1.48	1.11	-0.37	0.02	
8	Miami	1.30	1.13	-0.17	0.04	
9	Louisville	1.61				0.02
10	Brecksville (Cleveland)	1.35	1.15	-0.20	0.06	
10	Cincinnati	1.51	1.17	-0.34	0.07	
10	Dayton	1.39	1.39	0.00	0.30	
11	Battle Creek	1.17	1.10	-0.07	0.01	
12	Milwaukee	0.61				
12	North Chicago	1.29	0.88	-0.41	-0.21	
12	Tomah	1.46	1.00	-0.46	-0.09	
13	Minneapolis	1.60				
14	Des Moines	0.78	0.51	-0.27	-0.58	0.02
14	Knoxville	1.51				
15	Topeka	1.13	1.03	-0.10	-0.06	
16	Jackson	1.47	1.29	-0.18	0.20	
16	New Orleans	1.10	0.95	-0.15	-0.14	
16	North Little Rock	1.21	1.15	-0.06	0.06	
17	Temple	0.95				
17	Waco	1.10	0.88	-0.22	-0.21	
18	Phoenix	1.45				
19	Denver	1.17	0.75	-0.42	-0.34	0.02
19	Sheridan	1.33				
20	American Lake (Tacoma)	1.12	1.24	0.12	0.15	
20	Anchorage	1.10				
20	Boise	1.27	0.86	-0.41	-0.23	
20	Portland	1.33				
20	Roseburg	1.17	0.85	-0.32	0.04	
20	Seattle	1.20	0.75	-0.45	-0.34	
21	Hilo	1.39				
21	Palo Alto	1.24	0.94	-0.30	-0.15	
21	San Francisco	1.27				
22	West Los Angeles	0.81				
ALL VA		1.23	1.01	-0.22		

Indicates the median station for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse (p<.05) than the median station; SEP goal was not met.

No station was significantly worse than the median station for FY'00.

Table 4-12. Follow-Up Means for Work (Days) Adjusted for Covariates by VISN

VISN	FY 1998 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'98	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	2.82	1.48	-1.34	-1.18	0.05
2	2.02	3.09	1.07	0.43	
3	7.54				
4	2.15	2.32	0.17	-0.34	
5	3.14				
6	1.59	1.50	-0.09	-1.17	
7	1.92	1.12	-0.80	-1.54	
8	2.70	2.41	-0.29	-0.25	
9					
10	4.12	3.14	-0.98	0.48	
11	2.76	2.89	0.13	0.23	
12	1.62	3.15	1.53	0.49	
13	0.60				
14		5.07		2.40	
15	2.34	3.15	0.81	0.49	
16	2.12	2.98	0.86	0.32	
17#	2.09	2.66	0.57	0.00	
18					
19	2.61	0.95	-1.66	-1.71	
20	2.69	1.96	-0.73	-0.70	
21	1.96	2.68	0.72	0.02	
22	3.70				
ALL VA	2.79	2.38	-0.41		

Indicates the median VISN for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse ($p < .05$) than the median VISN; SEP goal was not met.

Table 4-13. Follow-Up Means for Work (Days) Adjusted for Covariates by Station

VISN	Station	FY 1998 Adjusted Follow-Up Mean	FY 2000 Adjusted Follow-Up Mean	FY'00 - FY'98	Deviation of FY'00 Mean from the Median Mean*	Significance Level
1	Northampton	2.57	2.35	-0.22	-0.36	X 0.04
1	Togus		0.40		-2.31	
1	West Haven	3.35	2.92	-0.43	0.21	
1	White River Junction		1.45		-1.26	
2	Batavia (Buffalo)	1.88	3.09	1.21	0.38	
3	Bronx	2.62				
3	Lyons	11.22				
3	Montrose	4.61				
4	Clarksburg	2.40	1.92	-0.48	-0.79	
4	Coatesville	2.02	2.67	0.65	-0.05	
5	Baltimore	3.11				
5	Martinsburg	3.01				
6	Salem	2.09	1.88	-0.21	-0.83	
6	Salisbury	1.10	1.15	0.05	-1.56	
7	Augusta	1.42	2.41	0.99	-0.31	
7	Tuscaloosa	2.25	0.41	-1.84	-2.31	
7	Tuskegee	2.16				X 0.006
8	Bay Pines	2.86	2.45	-0.41	-0.27	
8	Miami	2.48	2.32	-0.16	-0.39	
9	Louisville					
10	Brecksville (Cleveland)	6.34	3.00	-3.34	0.28	
10	Cincinnati	2.95	3.25	0.30	0.53	
10	Dayton	3.82	3.21	-0.61	0.50	
11	Battle Creek	2.85	2.86	0.01	0.15	
12	Milwaukee					
12	North Chicago	1.40	2.91	1.51	0.20	
12	Tomah	2.16	3.68	1.52	0.97	
13	Minneapolis	0.59				
14	Des Moines		5.21		2.50	
14	Knoxville					0.05
15	Topeka	2.26	3.33	1.07	0.61	
16	Jackson	0.91	3.13	2.22	0.42	
16	New Orleans	2.05	2.72	0.67	0.01	
16	North Little Rock	2.35	3.03	0.68	0.31	
17	Temple					
17#	Waco	2.12	2.71	0.59	0.00	
18	Phoenix					
19	Denver		1.28		-1.43	
19	Sheridan	2.69				
20	American Lake (Tacoma)	2.27	2.96	0.69	0.25	
20	Anchorage	9.58				
20	Boise	1.12	2.81	1.69	0.10	
20	Portland					
20	Roseburg	3.36	1.88	-1.48	-1.21	
20	Seattle	2.13	1.12	-1.01	-1.59	
21	Hilo	2.47				
21	Palo Alto	1.82	2.70	0.88	-0.01	
21	San Francisco					
22	West Los Angeles	3.76				
ALL VA		2.79	2.38	-0.41		

Indicates the median station for FY 2000.

* X indicates that outcome for FY 2000 was significantly worse (p<.05) than the median station; SEP goal was not met.

Table 4-14. Outcomes Report Card by VISN

VISN	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	<i>Rank Comb. M</i>
1	0.02	0.03	0.00	0.01	0.04	0.05	0.025	0.025	0.050	15
2	0.03	0.03	0.00	-0.01	0.04	-0.01	0.030	0.005	0.035	12
4	-0.09	-0.10	0.08	0.05	-0.02	0.01	-0.095	0.030	-0.065	3
6	-0.01	-0.05	0.01	0.00	-0.04	0.05	-0.030	0.005	-0.025	6
7	0.01	0.05	-0.04	-0.04	0.06	0.08	0.030	0.015	0.045	13
8	0.01	0.03	-0.02	-0.06	0.05	0.01	0.020	-0.005	0.015	11
10	0.02	0.04	-0.06	-0.07	0.08	-0.02	0.030	-0.018	0.013	9.5
11	0.03	0.04	0.01	0.02	0.03	-0.01	0.035	0.013	0.048	14
12	0.00	0.00	0.01	0.00	-0.02	-0.02	0.000	-0.008	-0.008	8
14	-0.05	-0.03	-0.05	-0.05	-0.06	-0.05	-0.040	-0.053	-0.093	1
15	-0.01	-0.03	0.01	0.02	0.02	-0.02	-0.020	0.008	-0.013	7
16	0.06	0.08	-0.01	-0.05	0.07	-0.02	0.070	-0.003	0.068	16
17	-0.08	-0.02	-0.02	-0.06	-0.02	0.00	-0.050	-0.025	-0.075	2
19	-0.07	0.00	-0.03	-0.03	-0.02	0.04	-0.035	-0.010	-0.045	5
20	-0.11	-0.05	0.01	0.02	0.00	0.04	-0.080	0.018	-0.063	4
21	0.00	0.02	0.00	0.02	-0.01	0.00	0.010	0.003	0.013	9.5
MEAN	-0.02	0.00	-0.01	-0.01	0.01	0.01	-0.006	0.000	-0.006	
STD	0.05	0.05	0.03	0.04	0.04	0.03	0.046	0.020	0.050	

Table 4-15. Outcomes Report Card by Station

VISN	Station	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	<i>Rank Comb. M</i>
1	Northampton	-0.02	0.01	0.03	-0.01	-0.03	0.01	-0.005	0.000	-0.005	16
1	Togus	0.01	0.03	0.03	0.06	0.00	0.05	0.020	0.035	0.055	28
1	West Haven	0.00	-0.01	-0.03	0.02	0.03	0.00	-0.005	0.005	0.000	18.5
1	White River Junction	0.00	-0.02	0.01	-0.01	0.01	0.03	-0.010	0.010	0.000	18.5
2	Batavia (Buffalo)	0.01	0.01	0.02	0.00	0.01	-0.01	0.010	0.005	0.015	21
4	Clarksburg	0.05	0.04	-0.01	-0.02	0.03	0.02	0.045	0.005	0.050	27
4	Coatesville	-0.19	-0.21	0.14	0.11	-0.11	0.00	-0.200	0.035	-0.165	2
6	Salem	0.02	-0.06	0.04	0.03	-0.06	0.03	-0.020	0.010	-0.010	14
6	Salisbury	-0.06	-0.05	0.01	0.00	-0.07	0.05	-0.055	-0.003	-0.058	7
7	Augusta	0.03	0.06	0.04	0.04	0.05	0.01	0.045	0.035	0.080	30.5
7	Tuscaloosa	-0.02	0.00	-0.06	-0.05	-0.01	0.10	-0.010	-0.005	-0.015	12
8	Bay Pines	0.01	0.00	-0.01	-0.07	0.01	0.01	0.005	-0.015	-0.010	14
8	Miami	-0.02	0.01	0.01	0.01	0.01	0.01	-0.005	0.010	0.005	20
10	Brecksville (Cleveland)	-0.02	0.00	-0.01	-0.05	0.01	-0.01	-0.010	-0.015	-0.025	11
10	Cincinnati	0.00	0.02	-0.04	-0.04	0.01	-0.01	0.010	-0.020	-0.010	14
10	Dayton	0.02	0.02	-0.01	0.00	0.05	-0.01	0.020	0.008	0.028	23
11	Battle Creek	0.02	0.03	0.02	0.03	0.00	0.00	0.025	0.013	0.038	26
12	North Chicago	-0.02	-0.01	0.00	0.00	-0.06	-0.01	-0.015	-0.018	-0.033	10
12	Tomah	0.01	-0.01	0.06	0.05	-0.02	-0.02	0.000	0.018	0.018	22
14	Des Moines	-0.07	-0.05	-0.03	-0.04	-0.09	-0.05	-0.060	-0.053	-0.113	3
15	Topeka	-0.04	-0.06	0.03	0.03	-0.01	-0.02	-0.050	0.008	-0.043	9
16	Jackson	0.04	0.04	-0.01	-0.03	0.03	-0.01	0.040	-0.005	0.035	24.5
16	New Orleans	-0.05	-0.01	-0.04	-0.05	-0.03	0.00	-0.030	-0.030	-0.060	6
16	North Little Rock	0.07	0.06	0.04	0.01	0.02	-0.01	0.065	0.015	0.080	30.5
17	Waco	-0.10	-0.04	0.00	-0.05	-0.05	0.00	-0.070	-0.025	-0.095	4
19	Denver	-0.10	-0.04	-0.01	-0.01	-0.06	0.03	-0.070	-0.013	-0.083	5
20	American Lake (Tacoma)	0.02	0.06	0.06	-0.01	0.04	-0.01	0.040	0.020	0.060	29
20	Boise	-0.04	-0.04	-0.03	0.00	-0.03	0.00	-0.040	-0.015	-0.055	8
20	Roseburg	0.02	0.03	-0.02	0.02	0.01	0.03	0.025	0.010	0.035	24.5
20	Seattle	-0.21	-0.17	0.03	0.06	-0.11	0.06	-0.190	0.010	-0.180	1
21	Palo Alto	-0.01	0.00	0.02	0.04	-0.05	0.00	-0.005	0.003	-0.003	17
MEAN		-0.02	-0.01	0.01	0.00	-0.01	0.01	-0.017	0.001	-0.015	
STD		0.06	0.06	0.04	0.04	0.05	0.03	0.060	0.020	0.065	

Table 4-16. Satisfaction with Treatment by VISN

VISN	FY 1997 Adj. Mean	FY 2000 Adj. Mean	FY'00 - FY'97	Deviation of FY'00 Mean from the Median Mean*	Significance Level	<i>Rank</i>
1	16.01	16.56	0.55	0.82	0.03	4
2		16.25		0.50		5
3	16.48					
4	16.62	15.75	-0.87	0.01		8
5	15.68					
6	17.23	17.05	-0.18	1.31	0.0001	2
7	15.29	15.35	0.06	-0.39		10
8#	15.67	15.74	0.07	0.00		9
9						
10	15.07	15.21	0.14	-0.53		12
11	15.63	14.49	-1.14	-1.26	X 0.004	16
12	15.76	16.09	0.33	0.35		6
13	12.49					
14		17.06		1.32	0.03	1
15	17.27	16.62	-0.65	0.88	0.04	3
16	16.16	15.29	-0.87	-0.46		11
17	15.18	14.77	-0.41	-0.97	X 0.02	15
18						
19	15.18	15.77	0.59	0.03		7
20	14.74	14.92	0.18	-0.82	X 0.006	13
21	14.84	14.90	0.06	-0.84	X 0.02	14
22						
ALL VA	15.69	15.62	-0.07			

Indicates the median VISN for FY 2000.

* X indicates that satisfaction for FY 2000 was significantly worse ($p < .05$) than for the median VISN.

Table 4-17. Satisfaction with Treatment by Station

VISN	Station	FY 1997 Adj. Mean	FY 2000 Adj. Mean	FY'00-FY'97	Deviation of FY'00 Mean from the Median Mean*	Significance Level	Rank
1	Northampton	17.44	17.66	0.22	1.75	0.02	1
1	Togus		16.19		0.27		12
1	West Haven	16.03	16.50	0.47	0.59		7
1	White River Junction		16.44		0.52		9
2	Batavia (Buffalo)		16.22		0.31		11
3	Bronx	15.84					
3	Lyons	17.80					
3	Montrose	15.41					
4	Clarksburg	16.52	13.97	-2.55	-1.94	X	0.002
4	Coatesville		16.68		0.77		31
5	Baltimore	14.33					6
5	Martinsburg	16.63					
6	Salem	17.26	17.05	-0.21	1.14		0.03
6	Salisbury	17.12	17.10	-0.02	1.18		0.02
7	Augusta	15.25	14.32	-0.93	-1.60	X	0.003
7	Tuscaloosa	15.06	15.67	0.61	-0.24		
7	Tuskegee	15.67					29
8	Bay Pines	15.05	15.43	0.38	-0.48		
8	Miami	16.39	16.03	-0.36	0.12		17
10	Brecksville (Cleveland)	14.75	15.21	0.46	-0.71		
10	Cincinnati	14.92	15.14	0.22	-0.77		18
10	Dayton	15.60	15.17	-0.43	-0.75		14
11	Battle Creek	15.59	14.41	-1.18	-1.50	X	0.005
12	Milwaukee						20
12	North Chicago	16.19	16.46	0.27	0.55		
12	Tomah	15.05	14.54	-0.51	-1.37	X	0.02
13	Minneapolis	12.42					22
14	Des Moines		17.27		1.36		21
15	Topeka	17.47	16.88	-0.59	0.97		0.04
16	Jackson		15.22		-0.70		0.05
16#	New Orleans	16.49	15.91	-0.58	0.00		2
16	North Little Rock	15.93	15.01	-0.92	-0.90	X	0.05
17	Waco	15.07	14.78	-0.29	-1.13	X	0.03
19	Denver		16.28		0.37		5
19	Sheridan	15.30					19
20	American Lake (Tacoma)	13.91	15.00	1.09	-0.92		
20	Boise	17.11	16.12	-0.99	0.20		16
20	Roseburg	16.14	15.97	-0.17	0.05		23
20	Seattle	13.74	14.07	0.33	-1.84	X	0.0001
21	Palo Alto	14.84	14.87	0.03	-1.05	X	0.02
21	Hilo	14.99					26
ALL VA		15.69	15.62	-0.07			10
							24
							13
							15
							30
							25

Indicates the median station for FY 2000.

* X indicates that satisfaction for FY 2000 was significantly worse (p<.05) than for the median station.

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Appendix A

Changes in Treatment of PTSD in the Department of Veterans Affairs, FY 1995 and FY 2000¹

The past six years have been a period of major change in the Veterans Health Administration (VHA). Tables presented in this report primarily focus on changes during the past year. The tables presented in this appendix, in contrast, illustrate changes in the six years since the VA reorganization was implemented.

Table A1 shows changes from FY 1995-FY 2000 in the number of programs operating in each VISN. Altogether there was a net loss of 2 SUPTs, 18 SIPUs, 12 EBTPUs and 3 PSUs, and a net gain of 3 PCTs, 8 PRRPs, 9 Day Hospital programs, and 1 specialized intensive PTSD programs with a substance abuse component.

Table A2 presents summary workload data on the work of specialized PTSD outpatient clinics: the PTSD Clinical Teams (PCT) program, the Substance Use PTSD Teams (SUPT) program, and the Women's Stress Disorder Treatment Teams (WSDTT) program. Overall these programs saw 71.2% more patients in FY 2000 than in FY 1995 although the intensity of contact decreased (5.5%).

Table A3 presents data on changes from FY 1995-FY 2000 in beds occupied during the end-of-the-year national census. There was a 54.7% decline in the total number of general psychiatry beds in VA; a 42.0% decrease in the proportion of beds used for PTSD treatment; and a 49.6% decline in length of stay. There was a 19.1% increase in the total number of domiciliary and PRRP beds in VA; a 96.1% increase in the proportion of beds used for PTSD treatment; and a 49.6% decline in length of stay.

Tables A4 and A5 present data on the change in the number and percent of patients receiving inpatient and residential treatment for PTSD. VA provided a total of 8,271 episodes of inpatient treatment for PTSD in FY 2000 compared to 14,849 in FY 1995, a 44.3% decrease. The average length of stay declined from 27.2 days in FY 1995 to 13.4 days in FY 2000, a 50.7% reduction. VA provided a total of 3,823 episodes of domiciliary and PRRP treatment for PTSD in FY 2000 compared to 715 in FY 1995, a 434.7% increase. The average length of stay declined from 112.2 days in FY 1995 to 50.2 days in FY 2000, a 55.3% reduction.

¹ FY 1995 data not does not include PRRP care.

Table A1. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 1995, FY 2000 and FY 1995-2000 change.

Fiscal Year 2000											
VISN	PCT	SUPT	WSDTT	SIPU	PSU	PRRP	EBTPU	DH	WTRP	OTHER	SUM VISN
1	6	2	1	1	0	1	0	2	0	0	13
2	2	0	0	0	0	1	0	0	0	0	3
3	4	0	0	0	0	2	0	0	0	0	6
4	3	1	0	0	0	2	0	0	0	0	6
5	3	0	0	0	0	1	1	0	0	0	5
6	4	0	0	2	0	0	0	0	0	0	6
7	7	0	0	0	0	0	0	2	0	0	9
8	4	1	0	0	0	2	0	0	0	0	7
9	5	0	0	0	0	0	0	0	0	0	5
10	4	0	1	0	0	1	1	2	0	1	10
11	4	0	0	1	0	0	0	0	0	0	5
12	2	0	0	0	1	2	0	0	0	0	5
13	2	1	0	0	0	0	0	1	0	0	4
14	4	0	0	0	0	1	0	0	0	0	5
15	5	0	0	1	0	0	0	0	0	0	6
16	6	1	1	0	0	2	1	1	0	0	12
17	4	0	0	1	0	0	0	0	0	0	5
18	4	0	0	0	0	0	0	0	0	0	4
19	3	0	0	0	0	0	0	1	0	0	4
20	3	0	0	1	0	1	2	0	0	0	7
21	4	1	0	0	0	2	0	0	1	0	8
22	4	0	1	0	0	0	0	0	0	0	5
ALL VA	87	7	4	7	1	18	5	9	1	1	140
MEAN	4	0	0	0	0	1	0	0	0	0	6
SD	1	1	0	1	0	1	1	1	0	0	3

Fiscal Year 1995											
VISN	PCT	SUPT	WSDTT	SIPU	PSU	PRRP	EBTPU	DH	WTRP	OTHER	SUM VISN
1	6	2	1	3	0	1	2	0	0	0	15
2	2	0	0	0	0	0	1	0	0	0	3
3	4	0	0	2	1	0	1	0	0	0	8
4	4	1	0	1	0	0	1	0	0	0	7
5	3	0	0	0	0	1	1	0	0	0	5
6	5	0	0	2	0	0	0	0	0	0	7
7	5	0	0	3	0	0	0	0	0	0	8
8	4	1	0	2	0	0	0	0	0	0	7
9	6	0	0	0	0	0	0	0	0	0	6
10	1	0	1	1	0	1	1	0	0	0	5
11	4	0	0	2	0	0	0	0	0	0	6
12	3	0	0	2	1	0	0	0	0	0	6
13	3	1	0	0	0	0	1	0	0	0	5
14	3	1	0	0	0	1	1	0	0	0	6
15	4	0	0	1	0	0	0	0	0	0	5
16	5	1	1	1	1	0	2	0	0	0	11
17	4	0	0	1	0	1	1	0	0	0	7
18	4	0	0	1	0	0	0	0	0	0	5
19	4	0	0	1	0	1	1	0	0	0	7
20	3	1	0	1	0	3	3	0	0	0	11
21	4	1	0	0	1	0	1	0	1	0	8
22	3	0	1	1	0	1	0	0	0	0	6
ALL VA	84	9	4	25	4	10	17	0	1	0	154
MEAN	4	0	0	1	0	0	1	0	0	0	7
SD	1	1	0	1	0	1	1	0	0	0	3

Change in number of programs											
VISN	PCT	SUPT	WSDTT	SIPU	PSU	PRRP	EBTPU	DH	WTRP	OTHER	SUM VISN
1	0	0	0	-2	0	0	-2	2	0	0	-2
2	0	0	0	0	0	1	-1	0	0	0	0
3	0	0	0	-2	-1	2	-1	0	0	0	-2
4	-1	0	0	-1	0	2	-1	0	0	0	-1
5	0	0	0	0	0	0	0	0	0	0	0
6	-1	0	0	0	0	0	0	0	0	0	-1
7	2	0	0	-3	0	0	0	2	0	0	1
8	0	0	0	-2	0	2	0	0	0	0	0
9	-1	0	0	0	0	0	0	0	0	0	-1
10	3	0	0	-1	0	0	0	2	0	1	5
11	0	0	0	-1	0	0	0	0	0	0	-1
12	-1	0	0	-2	0	2	0	0	0	0	-1
13	-1	0	0	0	0	0	-1	1	0	0	-1
14	1	-1	0	0	0	0	-1	0	0	0	-1
15	1	0	0	0	0	0	0	0	0	0	1
16	1	0	0	-1	-1	2	-1	1	0	0	1
17	0	0	0	0	0	-1	-1	0	0	0	-2
18	0	0	0	-1	0	0	0	0	0	0	-1
19	-1	0	0	-1	0	-1	-1	1	0	0	-3
20	0	-1	0	0	0	-2	-1	0	0	0	-4
21	0	0	0	0	-1	2	-1	0	0	0	0
22	1	0	0	-1	0	-1	0	0	0	0	-1
ALL VA	3	-2	0	-18	-3	8	-12	9	0	1	-14

Table A-2. INTENSITY DATA: SOPPs by VISN: FY 1995, FY 2000, and FY1995-2000 change.

VISN	FY 1995			FY 2000			% Change: FY 1995-2000		
	SOPPs WORKLOAD			SOPPs WORKLOAD			SOPPs WORKLOAD		
	Veterans	Visits	Vis/Vet	Veterans	Visits	Vis/Vet*	Veterans	Visits	Vis/Vet
1	2,983	32,579	10.92	3,739	43,153	11.54	25.3%	32.5%	5.7%
2	570	7,083	12.43	1,047	14,060	13.43	83.7%	98.5%	8.1%
3	1,142	17,745	15.54	2,576	36,805	14.29	125.6%	107.4%	-8.1%
4	2,125	22,253	10.47	1,929	16,769	8.69	-9.2%	-24.6%	-17.0%
5	758	10,866	14.34	1,657	19,341	11.67	118.6%	78.0%	-18.6%
6	1,600	15,951	9.97	2,278	14,632	6.42	42.4%	-8.3%	-35.6%
7	1,231	12,687	10.31	2,972	24,128	8.12	141.4%	90.2%	-21.2%
8	1,835	16,984	9.26	2,737	23,885	8.73	49.2%	40.6%	-5.7%
9	1,163	5,307	4.56	1,756	13,778	7.85	51.0%	159.6%	71.9%
10	531	2,652	4.99	2,296	21,880	9.53	332.4%	725.0%	90.8%
11	1,480	10,818	7.31	1,664	15,302	9.20	12.4%	41.4%	25.8%
12	679	7,733	11.39	826	11,145	13.49	21.6%	44.1%	18.5%
13	1,320	14,624	11.08	1,291	14,922	11.56	-2.2%	2.0%	4.3%
14	1,021	12,018	11.77	1,193	9,403	7.88	16.8%	-21.8%	-33.0%
15	1,332	17,460	13.11	2,400	30,316	12.63	80.2%	73.6%	-3.6%
16	3,826	36,276	9.48	6,088	60,096	9.87	59.1%	65.7%	4.1%
17	1,231	15,789	12.83	2,641	27,658	10.47	114.5%	75.2%	-18.4%
18	1,815	18,648	10.27	3,034	32,013	10.55	67.2%	71.7%	2.7%
19	1,062	10,339	9.74	1,481	12,667	8.55	39.5%	22.5%	-12.1%
20	1,545	20,290	13.13	4,307	44,009	10.22	178.8%	116.9%	-22.2%
21	1,197	14,456	12.08	2,997	29,039	9.69	150.4%	100.9%	-19.8%
22	917	11,315	12.34	2,573	24,975	9.71	180.6%	120.7%	-21.3%
ALL VA	31,074	333,873	10.74	53,192	539,976	10.15	71.2%	61.7%	-5.5%
AVERAGE	1,426	15,176	10.79	2,539	24,544	10.19	85.4%	91.5%	-0.2%
SD	752	7,747	2.60	1,197	12,442	2.01	77.3%	146.1%	30.1%
CV	0.53	0.51	0.24	0.47	0.51	0.20	0.91	1.60	-141.60

Table A3. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 1995, FY 2000, and FY 1995-2000 change, Annual VA Census.

VISN	FY 1995								FY 2000								% Change: FY 1995-2000							
	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment†				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS
1	796	66	8.3%	47.1	82	2	2.4%	95.5	247	26	10.5%	9.8	272	21	7.7%	54.4	-69.0%	-60.6%	26.8%	-79.1%	231.7%	950.0%	216.5%	-43.0%
2	311	16	5.1%	13.3	324	1	0.3%	282.0	104	1	1.0%	5.0	288	12	4.2%	22.3	-66.6%	-93.8%	-81.1%	-62.4%	-11.1%	1100.0%	1250.0%	-92.1%
3	857	47	5.5%	47.2	173	2	1.2%	149.0	392	8	2.0%	18.3	300	47	15.7%	35.2	-54.3%	-83.0%	-62.9%	-61.3%	73.4%	2250.0%	1255.2%	-76.4%
4	582	78	13.4%	27.5	170	0	0.0%	0.0	207	10	4.8%	9.6	414	44	10.6%	27.2	-64.4%	-87.2%	-63.9%	-65.1%	143.5%			
5	287	9	3.1%	27.1	284	51	18.0%	118.8	198	7	3.5%	4.0	347	45	13.0%	108.1	-31.0%	-22.2%	14.0%	-85.2%	22.2%	-11.8%	-27.8%	-9.0%
6	412	28	6.8%	29.6	254	7	2.8%	64.6	284	48	16.9%	12.5	215	3	1.4%	42.3	-31.1%	71.4%	148.6%	-57.7%	-15.4%	-57.1%	-49.4%	-34.4%
7	794	156	19.6%	19.0	229	7	3.1%	203.9	244	18	7.4%	23.4	172	15	8.7%	54.1	-69.3%	-88.5%	-62.4%	23.1%	-24.9%	114.3%	185.3%	-73.5%
8	380	54	14.2%	35.4	141	1	0.7%	365.0	110	6	5.5%	5.3	214	23	10.7%	105.6	-71.1%	-88.9%	-61.6%	-84.9%	51.8%	2200.0%	1415.4%	-71.1%
9	334	12	3.6%	15.0	443	4	0.9%	215.0	207	3	1.4%	3.3	341	3	0.9%	266.0	-38.0%	-75.0%	-59.7%	-77.8%	-23.0%	-25.0%	-2.6%	23.7%
10	301	19	6.3%	23.5	415	22	5.3%	44.8	142	5	3.5%	4.8	368	29	7.9%	33.7	-52.8%	-73.7%	-44.1%	-79.6%	-11.3%	31.8%	48.7%	-24.8%
11	779	47	6.0%	22.0					307	3	1.0%	25.3	91	25	27.5%	10.1	-60.6%	-93.6%	-83.7%	15.2%				
12	606	44	7.3%	36.0	412	15	3.6%	156.1	259	6	2.3%	10.2	621	43	6.9%	40.5	-57.3%	-86.4%	-68.3%	-71.8%	50.7%	186.7%	90.2%	-74.0%
13	224	11	4.9%	57.2	229	3	1.3%	65.3	42	2	4.8%	5.5	254	12	4.7%	25.6	-81.3%	-81.8%	-2.8%	-90.4%	10.9%	300.0%	260.6%	-60.8%
14	166	15	9.0%	16.4	89	21	23.6%	67.9	55	0	0.0%	0.0	83	7	8.4%	33.1	-66.9%	-100.0%	-100.0%	-100.0%	-6.7%	-66.7%	-64.3%	-51.2%
15	371	47	12.7%	49.3	181	0	0.0%		189	37	19.6%	34.2	256	4	1.6%	91.8	-49.1%	-21.3%	54.1%	-30.7%	41.4%			
16	487	43	8.8%	15.1	243	12	4.9%	112.6	267	6	2.2%	25.7	278	32	11.5%	27.0	-45.2%	-86.0%	-74.5%	70.0%	14.4%	166.7%	133.1%	-76.0%
17	183	17	9.3%	14.2	677	17	2.5%	102.1	296	28	9.5%	27.2	630	9	1.4%	134.0	61.7%	64.7%	1.7%	91.4%	-6.9%	-47.1%	-43.1%	31.3%
18	164	36	22.0%	20.8	125	2	1.6%	199.0	66	2	3.0%	1.0	132	1	0.8%	2.0	-59.8%	-94.4%	-86.2%	-95.2%	5.6%	-50.0%	-52.7%	-99.0%
19	252	44	17.5%	48.3					101	5	5.0%	9.4	14	5	35.7%	20.0	-59.9%	-88.6%	-71.7%	-80.5%				
20	182	55	30.2%	21.3	908	29	3.2%	228.7	102	28	27.5%	15.4	953	47	4.9%	109.4	-44.0%	-49.1%	-9.1%	-27.7%	5.0%	62.1%	54.4%	-52.2%
21	243	91	37.4%	88.7	45	0	0.0%		131	1	0.8%	4.0	160	36	22.5%	47.5	-46.1%	-98.9%	-98.0%	-95.5%	255.6%			
22	347	30	8.6%	27.2	208	18	8.7%	94.3	156	5	3.2%	16.4	307	37	12.1%	142.4	-55.0%	-83.3%	-62.7%	-39.7%	47.6%	105.6%	39.3%	51.1%
ALL VA	9,058	965	10.7%	35.1	5,632	214	3.8%	124.8	4,106	255	6.2%	17.7	6,710	500	7.5%	62.9	-54.7%	-73.6%	-42.0%	-49.6%	19.1%	133.6%	96.1%	-49.6%
AVERAGE	412	44	11.8%	32.0	282	11	4.2%	128.2	187	12	6.2%	12.3	305	23	9.9%	65.1	-50.5%	-64.6%	-38.5%	-49.3%	42.7%	424.1%	277.0%	-43.0%
S.D.	220	33	8.6%	18.0	204	13	6.0%	95.0	91	13	6.8%	9.4	204	16	8.7%	59.2	27.6%	47.0%	58.2%	52.3%	77.6%	733.7%	486.9%	42.9%
C.V.	0.53	0.74	0.73	0.56	0.73	1.18	1.42	0.74	0.49	1.12	1.10	0.77	0.67	0.71	0.88	0.9	-0.55	-0.73	-1.51	-1.06	1.82	1.73	1.76	-1.00

† Only includes domiciliary beds.

Table A4. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 1995, FY 2000, and FY 1995-2000 change.

	General Psychiatry Inpatient Care												Domiciliary and PRRP Care											
	FY 1995				FY 2000				Change				FY 1995†				FY 2000				Change			
	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year
1	1,299	906	25.7	37.2	765	556	15.2	21.0	-41.1%	-38.6%	-40.7%	-43.6%	1	1	53.0	53.0	71	67	90.6	96.0	7000.0%	6600.0%	71.0%	81.2%
2	415	295	20.3	28.6	188	155	7.8	9.5	-54.7%	-47.5%	-61.5%	-66.8%	11	11	142.8	142.8	246	193	16.5	21.0	2136.4%	1654.5%	-88.5%	-85.3%
3	699	552	38.1	47.7	251	203	15.9	19.6	-64.1%	-63.2%	-58.3%	-58.8%	22	22	124.0	124.0	457	385	42.9	51.0	1977.3%	1650.0%	-65.4%	-58.9%
4	839	597	33.5	47.1	429	329	13.5	17.7	-48.9%	-44.9%	-59.6%	-62.5%	11	10	113.6	125.0	303	263	40.4	46.6	2654.5%	2530.0%	-64.4%	-62.8%
5	184	135	19.4	24.8	221	176	11.6	14.5	20.1%	30.4%	-40.3%	-41.4%	145	139	117.9	123.0	177	174	124.2	126.3	22.1%	25.2%	5.4%	2.7%
6	1,179	691	13.9	24.3	913	647	17.1	24.1	-22.6%	-6.4%	22.7%	-1.0%	34	30	88.2	100.0	26	26	65.5	65.5	-23.5%	-13.3%	-25.8%	-34.5%
7	2,031	1,404	31.5	45.5	786	586	10.2	13.7	-61.3%	-58.3%	-67.7%	-70.0%	19	17	114.4	127.9	53	52	75.1	76.5	178.9%	205.9%	-34.4%	-40.2%
8	776	589	27.4	36.7	396	313	6.6	8.4	-49.0%	-46.9%	-75.9%	-77.2%	4	4	90.0	90.0	177	157	74.9	84.4	4325.0%	3825.0%	-16.8%	-6.2%
9	460	318	13.7	18.5	362	278	9.7	12.6	-21.3%	-12.6%	-29.5%	-32.0%	14	13	173.4	186.8	10	9	120.7	134.1	-28.6%	-30.8%	-30.4%	-28.2%
10	321	251	22.0	28.8	209	191	8.0	8.8	-34.9%	-23.9%	-63.5%	-69.5%	93	91	70.8	72.4	179	169	60.3	63.9	92.5%	85.7%	-14.8%	-11.7%
11	684	490	25.1	35.1	203	163	13.5	16.8	-70.3%	-66.7%	-46.4%	-52.2%					384	281	25.7	35.1				
12	591	416	32.9	46.2	276	207	13.2	17.6	-53.3%	-50.2%	-59.8%	-61.8%	13	12	146.2	158.4	402	360	38.3	42.8	2992.3%	2900.0%	-73.8%	-73.0%
13	264	188	20.7	28.5	70	68	7.5	7.7	-73.5%	-63.8%	-63.8%	-73.0%	34	32	103.1	109.6	40	39	53.1	54.5	17.6%	21.9%	-48.5%	-50.3%
14	177	129	22.1	32.4	64	44	7.0	10.1	-63.8%	-65.9%	-68.5%	-68.8%	112	110	81.4	82.9	86	59	28.2	41.1	-23.2%	-46.4%	-65.4%	-50.4%
15	746	493	30.8	46.0	424	335	27.4	34.7	-43.2%	-32.0%	-11.1%	-24.7%	3	3	268.7	268.7	45	39	44.0	50.8	1400.0%	1200.0%	-83.6%	-81.1%
16	891	704	22.8	28.6	304	274	10.2	11.4	-65.9%	-61.1%	-55.1%	-60.3%	31	31	104.6	104.6	408	382	30.7	32.8	1216.1%	1132.3%	-70.6%	-68.6%
17	587	403	15.1	22.7	581	449	20.2	26.1	-1.0%	11.4%	33.8%	15.1%	38	36	143.1	151.0	30	29	100.3	103.7	-21.1%	-19.4%	-29.9%	-31.3%
18	380	299	24.9	34.5	216	192	7.5	8.5	-43.2%	-35.8%	-69.8%	-75.5%	4	4	70.0	70.0	16	15	86.3	92.0	300.0%	275.0%	23.2%	31.4%
19	513	367	38.3	52.4	401	320	8.5	10.7	-21.8%	-12.8%	-77.7%	-79.6%					71	68	42.3	44.2				
20	856	669	24.0	31.8	824	699	13.9	16.4	-3.7%	4.5%	-42.2%	-48.6%	55	51	157.9	170.2	231	214	54.2	58.5	320.0%	319.6%	-65.7%	-65.6%
21	599	482	53.0	63.5	189	163	11.0	12.8	-68.4%	-66.2%	-79.2%	-79.9%	0	0	0.0		320	303	58.5	61.8				
22	358	288	25.0	30.7	199	170	9.8	11.4	-44.4%	-41.0%	-60.9%	-62.8%	71	71	141.3	141.3	91	86	151.2	160.0	28.2%	21.1%	7.0%	13.2%
All VA	14,849	10,666	27.2	37.8	8,271	6,414	13.4	17.3	-44.3%	-39.9%	-50.7%	-54.2%	715	682	112.2	117.7	3,823	3,370	50.2	57.0	434.7%	394.1%	-55.3%	-51.6%
AVG.	675	485	26.4	36.0	376	296	12.1	15.2	-42.3%	-36.0%	-48.9%	-54.3%	36	34	115.2	120.1	174	153	64.7	70.1	1292.9%	1175.6%	-35.3%	-32.6%
S.D.	412	280	8.9	10.9	242	179	4.9	6.6	24.4%	27.3%	29.2%	24.4%	39	38	52.9	54.4	144	125	34.4	35.0	1836.7%	1703.8%	40.2%	41.7%
C.V.	0.61	0.58	0.34	0.30	0.64	0.60	0.40	0.43	-0.58	-0.76	-0.60	-0.45	1.10	1.11	0.46	0.45	0.83	0.81	0.53	0.50	1.42	1.45	-1.14	-1.28

† Only includes domiciliary beds.

Table A5. Percent treated for PTSD by VISN: FY 1995, FY 2000, and FY 1995-2000 change.

VISN	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 1995		FY 2000		% Change: FY 1995-2000		FY 1995†		FY 2000		% Change: FY 1995-2000	
	Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD	
	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans
1	18.1%	20.3%	14.0%	16.0%	-22.6%	-21.4%	0.5%	0.5%	9.1%	10.4%	1616.0%	1809.8%
2	13.7%	15.9%	7.6%	9.5%	-44.9%	-40.0%	2.4%	2.6%	11.7%	13.1%	393.8%	403.9%
3	10.9%	13.8%	5.8%	7.3%	-46.5%	-47.3%	5.2%	5.4%	22.6%	23.9%	333.9%	347.0%
4	13.1%	16.4%	9.4%	10.5%	-28.0%	-36.2%	1.8%	1.6%	9.5%	9.5%	439.0%	483.1%
5	6.5%	7.6%	7.4%	9.3%	13.1%	21.9%	35.5%	35.1%	16.9%	17.6%	-52.5%	-49.9%
6	16.4%	16.3%	14.6%	15.7%	-11.2%	-3.6%	4.2%	4.1%	1.6%	1.7%	-62.9%	-58.3%
7	24.1%	26.7%	15.8%	16.6%	-34.6%	-38.0%	4.3%	4.2%	8.2%	8.7%	91.6%	107.7%
8	9.7%	11.1%	6.8%	7.8%	-29.5%	-30.0%	1.2%	1.3%	17.8%	18.0%	1382.4%	1330.1%
9	8.8%	9.1%	7.5%	8.2%	-14.4%	-10.2%	2.0%	2.1%	1.0%	1.0%	-51.1%	-53.2%
10	8.4%	10.1%	6.1%	8.0%	-27.4%	-20.7%	6.0%	6.4%	6.1%	6.7%	2.2%	4.3%
11	12.1%	13.3%	4.5%	5.2%	-62.6%	-60.5%			37.8%	32.3%		
12	10.6%	12.6%	6.1%	7.5%	-42.2%	-40.4%	1.9%	1.9%	13.8%	14.3%	612.1%	671.2%
13	8.5%	9.2%	3.3%	4.8%	-60.7%	-47.9%	6.8%	6.8%	2.7%	2.9%	-60.8%	-57.3%
14	7.6%	8.6%	4.3%	4.3%	-43.6%	-49.9%	32.0%	32.3%	11.0%	10.1%	-65.5%	-68.8%
15	12.6%	13.6%	8.8%	10.3%	-30.4%	-24.0%	1.0%	1.1%	3.5%	3.4%	239.6%	216.6%
16	11.8%	13.2%	4.3%	5.4%	-63.6%	-59.4%	3.9%	4.1%	17.6%	18.8%	351.2%	364.0%
17	11.1%	12.7%	12.5%	14.5%	13.0%	14.5%	3.7%	4.0%	1.5%	1.9%	-59.5%	-53.2%
18	10.1%	12.3%	6.8%	8.7%	-32.8%	-29.2%	0.8%	1.0%	1.9%	2.0%	130.0%	103.4%
19	19.6%	22.4%	15.9%	18.4%	-18.7%	-17.9%			67.0%	66.0%		
20	21.0%	24.8%	21.6%	25.5%	2.9%	2.8%	4.1%	4.2%	9.4%	9.6%	129.4%	131.1%
21	14.1%	18.5%	5.7%	7.5%	-59.6%	-59.4%	0.0%	0.0%	26.4%	29.7%		
22	5.8%	7.6%	4.7%	5.8%	-19.0%	-23.1%	9.4%	9.5%	8.0%	7.8%	-14.9%	-17.5%
All VA	12.9%	14.8%	9.1%	10.7%	-29.7%	-27.8%	5.8%	6.0%	11.3%	11.5%	94.4%	92.5%
Avg.	12.5%	14.4%	8.8%	10.3%	-30.1%	-28.2%	6.0%	6.1%	13.9%	14.1%	272.4%	285.3%
S.D.	4.7%	5.3%	4.7%	5.2%	21.4%	22.0%	9.3%	9.3%	14.6%	14.3%	454.1%	481.2%
C.V.	0.37	0.37	0.54	0.50	-0.71	-0.78	1.54	1.52	1.06	1.01	1.67	1.69

† Only includes domiciliary beds.

APPENDIX B

This Appendix recapitulates the goals for special emphasis programs for PTSD as presented in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. We have modified Population Measures 1 - 3 and Program Measure 2 and added Population Measure 6 with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters. Population Measures 4 and 5 and Program Measures 1 and 3 remain unchanged. Population Measures 1, 2, 3 and 6 specify outcome goals for PTSD, substance abuse, work and violence. We have introduced technical modifications to the meeting of these goals so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kaspro et al., 1997; Seibyl et al., 1997).

Population Measure 1 as modified is:

Change in PTSD symptoms on the short form of the Mississippi Scale from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Our experience in monitoring outcomes suggests that alcohol abuse and drug abuse should be considered separately. Outcomes for the two are not related highly to each other, despite them both being forms of substance abuse; combining them masks some differences among programs. Therefore, **Population Measure 2** is modified by splitting it into two Measures, as follows:

Change in alcohol abuse symptoms as measured by the Alcohol Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Change in drug abuse symptoms as measured by the Drug Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Population Measure 3 as modified is:

Change in occupational functioning as measured by the number of days employed or the number of dollars earned from work during the past 30 days from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Population Measure 4, unmodified, is:

Proportion of veterans in need of PTSD care treated for PTSD in VA outpatient mental health clinics in each year.

Goal: Fifty-five percent.

Population Measure 5, unmodified, is:

Proportion of veterans who receive a psychiatric outpatient visit within 30 days of discharge from an inpatient program.

Goal: Greater than 51%.

Population Measure 6, newly added, is:

Change in violence as measured by the Violence Scale as modified from the National Vietnam Veterans Readjustment Study from admission to follow-up 4 months after discharge.

Goal: Program not significantly worse than the median program.

Program Measure 1, unmodified, is:

Proportion of veterans successfully contacted for outcome assessment after discharge from an inpatient PTSD program.

Goal: 50%.

Program Measure 2 has been changed from “Number of patients seen...” to “Number of patients treated...” It is possible for programs to screen a large number of veterans with one contact each, without providing meaningful treatment in the process. The criterion for treatment to consist of more than one contact provides a lenient definition of treatment and, at the same time, eliminates the potential reward for focusing on performing a large number of screening contacts with limited benefit to the veterans involved. Program Measure 2 now is:

Number of patients treated (that is, seen more than once) per filled FTEE in the outpatient PTSD program (including facility contributed FTEE).

Goal: 75 patients/filled FTEE.

Program Measure 3, unmodified, is:

Number of hospital days for patients in the 6 months after discharge from an inpatient PTSD program.

Goal: Less than 13.5 days.

Appendix C

Calculation of **FILLED FTEE** and **DIRECT COST**

Appendix C is a description of the procedure for calculating **FILLED FTEE** (tables 3-1, 3-2, 3-5, 3-6, 3-7, and 3-8) and **DIRECT COST** (Part I, tables 4 and 5; tables 3-9, 3-10, 3-11, 3-12) for Specialized PTSD Programs.

Filled FTEE and Direct Cost are calculated from data supplied from the *Specialized PTSD Programs Annual Report*. These data include the following items from Parts 2 and 5 on the Annual Report form: Part 2 - "Total Recurring All Other Funds Expended up to \$9999.00"; Part 5, item c - "Start and End Dates", which are used to determine time worked for the VA facility; Part 5, item d - "Number of Hours Worked Per Pay Period for the Facility"; Part 5, item e - "Actual Salary Plus Benefits Paid for Work at the Facility for this Fiscal Year"; Part 5, item f, "Start and End Dates", which are used to determine time worked for the program; and Part 5, item g - "Total Number of Hours Committed Per Week to the Program".

Steps for calculating **FILLED FTEE**:

1. Using the program Start Date and End Date (item "f", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the program. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Program***.
2. Divide the Number of Hours Committed Per Week to the Program (item "g", for *each* of the completed sections numbered 1-48, in Part 5 of the Annual Report) by 40 to determine the ***Portion of A Full FTEE Worked for the Program During The Fiscal Year***.
3. Multiply the Portion of the Fiscal Year Worked for the Program by the Portion of A Full FTEE Worked for the Program During The Fiscal Year to determine the ***Filled Program FTEE*** for each individual staff member.
4. For Specialized Outpatient PTSD Programs, sum the Filled Program FTEE for each staff member within a program to determine the total ***FILLED FTEE***, for each program (tables 3-1, 3-2, 3-5 and 3-6).
4. For Specialized Intensive PTSD Programs, sum the Filled Program FTEE for each staff member across programs at a facility to determine the total ***FILLED FTEE***, for each facility (tables 3-3, 3-4, 3-7 and 3-8).

Steps for calculating ***DIRECT COST***:

1. Using the facility Start Date and End Date (item "c", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the facility. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Facility***.
2. Divide the Number of Hours Worked Per Pay Period for the Facility (item "d", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) by 80 to determine the ***Portion of A Full FTEE Worked for the Facility During the Fiscal Year***.
3. Multiply the Portion of the Fiscal Year Worked for the Facility by the Portion of A Full FTEE Worked for the Facility During The Fiscal Year to determine the ***Filled Facility FTEE*** for each individual staff member.
4. Multiply the Actual Salary Plus Benefits Paid by the factor $[1/\text{Filled Facility FTEE}]$ to determine the ***Full-time Equivalent Salary & Benefits for working at the facility*** for each individual staff member.
5. Multiply the Full-time Equivalent Salary & Benefits by the Filled Program FTEE to determine ***Actual Salary & Benefits for the Program*** for each individual staff member.
6. For Specialized Outpatient PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars or ***DIRECT COST***, by program (tables 3-9 and 3-10).
7. For Specialized Intensive PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars, for each program. Then sum the Total Program Dollars for each program at a facility to determine the ***DIRECT COST***, for the facility (tables 3-11 and 3-12).

Appendix D

Table D-1. Unadjusted Means for Stations with Inadequate Data

VISN	Station	# Followed Up	Short Mississippi Scale		NEPEC PTSD Scale		ASI Alcohol Composite		ASI Drug Composite		Violence Scale		Work (Days)	
			Admission	Follow-Up	Admission	Follow-Up	Admission	Follow-up	Admission	Follow-Up	Admission	Follow-Up	Admission	Follow-Up
3	Lyons	69	39.66	41.06	16.88	16.85	0.09	0.12	0.04	0.05	1.51	1.11	3.35	2.44
3	Montrose	19	40.90	37.34	17.10	16.00	0.23	0.10	0.12	0.05	1.75	0.86	3.40	1.67
5	Baltimore	28	39.55	40.17	15.80	16.09	0.15	0.12	0.07	0.05	1.48	0.97	6.27	4.34
5	Martinsburg	44	42.34	35.71	17.64	14.68	0.08	0.09	0.04	0.04	1.71	0.94	0.70	1.33
12	Milwaukee	4	39.24	37.02	14.25	14.82	0.24	0.13	0.14	0.05	1.53	1.33	0.40	6.00
13	Minneapolis	5	34.13	33.32	14.64	13.04	0.20	0.07	0.05	0.05	0.69	0.74	3.21	3.80
19	Sheridan	6	36.60	36.61	15.30	15.48	0.11	0.05	0.04	0.04	1.75	1.00	0.83	3.95
21	Hilo	23	41.00	40.73	17.42	16.59	0.13	0.12	0.04	0.05	1.74	1.37	2.92	1.47
TOTAL		198												

APPENDIX E

Acronyms and Abbreviations Used in the Text

ASI	Addiction Severity Index
BD	Bed Days
CDR	Cost Distribution Report
C.V.; CV	Coefficient of Variation
DC; D/C	Discharge
DD214	Dept. of Defense Form #214
DH	Day Hospital
Dx (Dx=d)	Diagnosis (Diagnosed)
EBTPU	Evaluation and Brief Treatment Unit
FTEE	Full Time Employee Equivalent
FY	Fiscal Year
INDVDLS	Individuals
LOS	Length of Stay
M	Mean
MH	Mental Health
N	Number
NEPEC	Northeast Program Evaluation Center
PCT	PTSD Clinical Team
PRRP	PTSD Residential Rehabilitation Program
PSF	PTSD Status Form
PSU	PTSD Substance Abuse Unit
PTF	Patient Treatment File
PTSD	Posttraumatic Stress Disorder
PTSS	Posttraumatic Stress Syndrome
RCS	Readjustment Counseling Service
SA	Substance Abuse
SC	Service Connected
S.D.; SD; STD	Standard Deviation
SEP	Special Emphasis Program
SIPP	Specialized Intensive PTSD Program
SIPU	Specialized Inpatient PTSD Unit
SOPP	Specialized Outpatient PTSD Program
SUPT	Substance Use PTSD Treatment
Tx	Treatment
VA	Dept. of Veterans Affairs
VAMC	Dept. of Veterans Affairs Medical Center
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network
WSDTT	Women's Stress Disorder Treatment Team
WSI-1	War Stress Interview - Part 1
WTRP	Women's Trauma Recovery Program